

Data Assessment Registry Mental Health & Addiction User Manual

July 2009

STATE OF INDIANA FAMILY AND SOCIAL SERVICES ADMINISTRATION DIVISION OF MENTAL HEALTH AND ADDICTION 402 W. WASHINGTON STREET – W353 INDIANAPOLIS, IN 46204

FAMILY AND SOCIAL SERVICES ADMINISTRATION

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Purpose of Document

This document contains training information for the CANS and ANSA tools and the Data Assessment Registry Mental Health & Addiction (DARMHA) website. DARMA merges the former Indiana Behavioral Health Assessment System (IBHAS) and the Community Services Data System (CSDS) into one central point of access. As this is a wide audience, consisting of clinicians, administrative staff, management and technology staff, some of the information that is policy based and/or technology has been "boxed-in". Interested readers have the information; others can just skip a "boxed" area.

Introduction

DMHA is providing an integrated tool, by which partners and providers can interface their applications to the Data Assessment Registry Mental Health and Addiction (DARMHA), consolidating the IBHAS and the CSDS applications into one central location for data. For DMHA contract providers, DARMHA will eliminate duplicate entry of demographic data. For non-DMHA providers and organizations, DARMHA will look and function much like IBHAS. DARMHA users will be able to access any service, diagnosis, EBP History and other types of data currently contained in CSDS from the DARMHA.

After July 1, you will be able to import all data through what is now the DARMJA interface, which is very similar to the IBHAS interface. The name and web address will be changed to eliminate confusion. There are three files that can be submitted.

- Consumer Demographics which you already do or can supply via IBHAS.
- CANS/ANSA assessments which is available in IBHAS.
- CSDS data file elements that are not contained in the first two.

For CSDS users accustomed to the file, the former RDO record has been replaced. The data is divided into 6 subject areas/modules: Episode, Diagnosis History, Encounters/Services, Episode Based (EBP) History, National Outcome Measures (NOMS), Agreement Type/Funding History,

General Rules:

• Data items may be modified within the system up to a year from their initial entry date. The exception to this is the Episode Data Set. Episode Data Sets can span multiple years and are only constrained by this rule once they are closed. Modifications may be applied to an Episode Record up to a year after the Episode End date.

• Data that has surpassed the 1 year edit period is locked and cannot be modified except by DMHA staff.

Subject Areas/Modules:

- The Consumer Episode data record is the framework for all of the detail data elements that define the consumer's episode of care. The Episode Start Date initiates the episode and the Episode End Date closes the episode. All Encounter, Assessment, Diagnosis, NOMS, EBP, and Agreement Funding records for a particular episode must be dated between the start and end dates of the episode.
- Diagnosis History is a new subject area that takes the current CSDS Primary/Secondary diagnosis to the next level. We are providing you the ability to submit diagnosis information on the 5 different Axes. Axis I provides 3 levels of diagnosis, Axis II provides 2 levels of diagnosis, Axis III provides 3 levels of diagnosis plus an area for a narrative description, Axis IV is a single value plus a narrative description and finally Axis V which is the GAF score. Since this is a history record the diagnosis record may be submitted as often as new diagnosis data is available or as frequently as it changes.
- Encounters or Services reflect two changes. If a particular service is rendered and it is billed at a MRO rate (value), the value field may be skipped and the system will auto populate that value from our services table. The other major change is Zero Encounters will no longer be allowed or required. We are providing a new mechanism within the Episode Record to track individuals who are in continuing service but are not receiving encounters at this time.
- The NOMS record contains items required for reporting to the federal government under our various contracts and block grants. This includes living arrangement, employment and substance usage. The NOMS record is required to be submitted for all HAP eligible consumers at the start of the episode, every 180 days thereafter as long as the consumer stays in service and finally at discharge. This is no change from the way the current RDO record is submitted.
- EBP History tracks the usage of the different EBPs for each consumer. EBP reporting is required by the federal government for our block grants. Since a consumer, depending on their severity level, may never be supported through an EBP, no data would be submitted for this record type. EBP records are submitted as often as a new pattern of EBPs are issued to the consumer.
- Agreement Type/Funding History has been broken out into its own subject area and simplified in this new application. Since this is a history, you will be able to submit corrections/adjustments to a consumer's agreement type/funding as needed. This record is used for carve-out funding requested for consumers with one of the remaining special funding areas. As such, you may only need to submit one Agreement/Funding History record per year per consumer, depending on need and stability.
- The assessment record, CANS/ANSA, provides DMHA providers and partners with realtime feedback concerning a consumer's assessment, which is based on one or more sophisticated algorithms. The web application provides for the direct input of consumer

demographic information as well as CANS assessment information in any of the currently State certified tools. The tools, once completed, trigger one of five decision support models (algorithms based on patterns of CANS or ANSA item ratings) help make decisions about the appropriate intensity or level of intervention. Once a completed assessment is saved, the recommendations are immediately available.

• The above data will be provided in a single file using a variable length, comma separated value data file. The Import documentation indicates that there will be a "Record Identifier" field at the beginning of each record line that will tell the system what type of data is following.

Use of Common Assessment Tools and Outcome Management Processes

Effective July 2008, a Child and Adolescent Needs and Strengths (CANS) or the Adult Needs and Strengths Assessment (ANSA) is required by the Division of Mental Health and Addiction (DMHA) for each individual who is registered in DARMHA for the Hoosier Assurance Plan, DMHA funding, or who is treated in a state hospital. Residential providers, licensed by the Department of Child Services (DCS), implemented the CANS in 2008. These tools are also beginning to be used in other public service systems. Each system or agency is developing related policy. An Interagency Implementation Team provides oversight to the multi-system implementation.

As part of the Indiana's behavioral health system transformation, DMHA manages CANS/ANSA training and certification and developed DARMHA for multi-system use. It is recognized that behavioral health services are provides across service system. As system capacity permits, the CANS and ANSA tools and DARMHA may be used for any individual who may need or who receives mental health or addiction services.

On a practical level, information from the CANS and ANSA tools is being used to make decisions at multiple levels. Information from the tools can be used to support effective practice at the individual, program and system levels. The tools describe individual and family needs and strengths. The resulting information can be used to develop individualized intervention plans, to chose an appropriate intensity of service, to identify programmatic needs, and to allocate resources. The information can be used to improve the quality of services through case management and supervision and through targeted quality improvement initiatives. Monitoring outcomes will help celebrate successes, identify areas for additional services, program evaluation and performance contracting.

It is recommended that each individual read this document in its entirety.

Residential Providers, Department of Child Services and others whose primary use of the DARMHA application is to perform "Short Form" CANS, the "Fast Track" section explains how to use DARMHA to meet your roles and goals.

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Assessment Tools

In July 2007, Indiana implemented the **Child and Adolescent Needs and Strengths (CANS)** assessment tool for children and youth who are served through DMHA contract providers and state hospitals. In July 2008, the **Adult Needs and Strengths Assessment (ANSA)** tool was implemented for individuals age 18 or older. In 2008 residential providers, licensed by Department of Child Services (DCS), began using the CANS; DCS will begin training Family Case Mangers and using the CANS to support intervention plan decisions during SFY2010.

For the DMHA system, all youth, those with serious emotional disturbance and with addiction, are required to have a comprehensive CANS assessment administered by a certified CANS user and the data submitted to DMHA. All adults with severe mental illness, co-occurring disorders or addiction needs are required to have an ANSA assessment rated by a certified ANSA user. Young adults, ages 18 through 21, who are served through youth services, may be rated using the CANS. CANS and ANSA ratings and related data will be submitted to DMHA through IBHAS. All CANS and ANSA data reported must include the certified user's identification number. The CANS and ANSA tools and IBHAS may be used for any individual who receives mental health or addiction services.

Reassessments

In community based care, reassessments using the CANS or ANSA are required at least every 180 days of continuous services to the individual. More frequent assessment is indicated if a more intense level of service is being requested. If enough information is available, a transition/discharge assessment is requested.

Indiana Behavioral Health Assessment System (IBHAS)

IBHAS, predecessor of DARMHA, was one of two databases supporting the CANS and ANSA. CANS and ANSA ratings and demographic information previously reported to IBHAS will be reported to DARMHA. DARMHA, like IBHAS, will analyze the ratings and provided related information in reports to providers, networks and state agencies. In SFY2010, IBHAS will merge with CSDS to become DARMHA.

Community Services Data System

The Community Service Data System (CSDS) is the database used by DMHA contract providers to register individuals who are eligible for the Hoosier Assurance Plan and to report required data.

Background for Indiana's CANS Implementation

The Child and Adolescent Needs and Strengths (CANS) assessment tools have been selected to use statewide in the behavioral health system and, ideally, across child service systems and providers that address the behavioral health needs of children and their families. The CANS outcome management tools have been developed by John Lyons, PhD, The University of Ottawa, formerly with the Northwestern University, and many stakeholders across multiple states. The assessment instrument is copyrighted by the Praed Foundation, 1999 (http://praedfoundation.org). There is no cost to use the tools. However, individuals who use the tools must be trained and certified annually. For additional information, visit the Buddin Praed Foundation at (http://praedfoundation.org).

An ad hoc committee made up of representatives from each child service system, families and youth, professionals from a variety of disciplines, and the academic community spent several months reviewing multiple assessment tools before recommending the CANS. Criteria guiding the review included: one tool for multiple tasks, useful to the child and family, inform intervention plan, provide decision support to level of care decisions, serve as an outcome measure, and improve communication between systems. The Division of Mental Health and Addiction accepted the recommendation, viewing the CANS tools as a strategy to transform Indiana's behavioral health services across child service systems. Implementation of a common assessment tool and outcome quality management processes across child service systems were endorsed by Indiana's Social, Emotional and Behavioral Health Plan in 2006.

Since early 2006, an Interagency Implementation Team has worked together. The CANS has been tailored to meet Indiana's cross system needs. Decision support models have been developed, a training/certification program has been implemented and incremental implementation across systems has begun. DMHA, supported by the Division of Technology (DTS) within the Indiana Family and Social Service Administration (FSSA) and the Indiana University School of Social Work, provides leadership. DMHA's technology team, DTS, and the Indiana Office of Technology (IOT) have developed DARMHA to support the continued use and further implementation of the CANS.

A similar cross system work group reviewed options for an adult functional assessment tool in Indiana at the request of the Transformation Initiative. After reviewing a number of assessment tolls against multi-dimensional criteria lead to a recommendation that the ANSA replace DMHA's HAPI-A functional assessment. Recovery principles, considering how behavioral health needs affect an individual's functioning in meaningful relationships, employment, living arrangements, legal involvement, self care and strengths lead to the development of Version 2 of the ANSA. Items from the Young Adult Needs and Strength Assessment or ANSA-T were incorporated into the basic ANSA to reflect more quality of life issues.

Indiana's Tools: CANS and ANSA

The CANS and ANSA have been tailored for Indiana's use across service systems. These comprehensive assessments include domains and items from the Mental Health CANS, Child Welfare CANS, and Juvenile Justice CANS, ANSA and YANSA. Indiana's multi-system tools assess the needs and strengths of the individual and caretaker. Specialized modules are triggered when needs are identified in the core items. To access Indiana's seven (7) CANS assessment tools and one ANSA tool, go to and look under "Documents". CANS & ANSA Manuals and Answer Sheets were updated for July 1, 2010. Get current answer sheets from the website! https://dmha.fssa.in.gov/darmha

- For behavioral health providers, the *CANS for Indiana Comprehensive Multi-system Assessment* (5 to 17 or *Birth to 5*) tools are to be completed as part of an initial assessment. For a five year old, choose the tool most appropriate for the child's developmental needs.
- CANS Reassessments (5 to 17 or Birth to 5) are required for DMHA contract providers, to be reported to the IBHAS at least every 180 days of continuous services, if more intense services are recommended or requested, or when a child and family complete services. Reassessments are recommended whenever changes are being made to plans of care.
- The *Crisis Assessment Tool (CAT)* can be used for crisis or emergency services to choose between acute inpatient hospitalization or community based crisis care.
- The Short CANS (5 to 17 or Birth to 5) tools are made available to Indiana's crisis youth shelters and to the Department of Child Services.
- The ANSA tool is used with individuals 18 or older. The same tool is used for the initial and reassessments. The tool is designed in a modular framework, expanding and contracting based on the needs of the individual. The Caretaker Domain is optional.

Extension Modules. When using the Comprehensive CANS or ANSA tools, some questions (items) trigger extension modules. Triggered extension modules are required to complete the assessment.

Transition between Tools. Use the age/developmentally appropriate CANS tool for children and youth. If a young child is not yet in public school and needs are best described by the Birth to 5 tools, use them. When a child begins school or becomes 6, transition to the 5 to 17 tool. The CANS may also be used for young adults, 19 to 21, who continue to be served in youth or transitional services. The CANS is required for Indiana's Community Alternative to Psychiatric Residential Treatment Facility Medicaid Demonstration Grant and PRTF services. In general, the ANSA is used for individuals who are 18 or older.

Indiana Decision Support Models

Four decision support models (algorithms based on patterns of CANS or ANSA item ratings) help make decisions about the appropriate intensity or level of intervention:

- 1. CANS Behavioral Health Decision Model
- 2. Crisis Behavioral Health Decision Model (only with CAT)
- 3. CANS Child Welfare/Juvenile Justice Place Decision Model
- 4. ANSA Behavioral Health Decision Model

- 1. The CANS Behavioral Health Decision Model recommends the appropriate intensity of treatment services. IBHAS will automatically calculate the behavioral health algorithm for children, ages 5 to 17, when a comprehensive CANS or reassessment is completed. The six intensity of service options include: Outpatient Services, Supportive Community Services, Intensive Community Based Services through a Child & Family Wraparound Team, Community Alternative to Psychiatric Residential Treatment Facility (CA-PRTF) Grant and Congregate Care (PRTF, State Hospital or CA-PRTF grant).
- 2. When the Crisis Assessment Tool (CAT) is used, the **Crisis Behavioral Health Decision Model** algorithm helps decide between admission to an acute inpatient hospital or community based crisis services. The algorithm is based on emerging research which identifies youth benefit from each option.
- 3. The Child Welfare/Juvenile Justice Placement Decision Model indicates the appropriate level of residential placement for children and youth when child welfare or juvenile court at the time of the administration of this tool has decided on an out-of-home placement.
- 4. The **ANSA Behavioral Health Decision Model** indicates the appropriate intensity of community based behavioral health services. The six options include: Prevention/Recovery, Outpatient, Supportive Community Based Services, Intensive Community Based Services, and Assertive Community Treatment.

Required Questions. For children 5 to 17, three additional questions are necessary to calculate the decision models. For children, Birth to 5, only the second question is required. These questions must be answered to complete and close the CANS assessments in IBHAS.

1. Has the child received intensive community based services (ICBS) within the last 6 months prior to this assessment?

NA - Not Applicable

- 0 No, Intensive Community Based Services have not been attempted prior to current assessment.
- 1 Yes, Intensive Community Based Services have been attempted prior to current assessment.

2. Has a decision currently been made by DCS or the court to remove a child from his home?

- 0 No This child is currently not involved or referred by DCS.
- 1 Yes The child is either being held by or referred by DCS. Run the child placement algorithm.
- **3. How old is the child?** Select the age group this child more closely falls in.

NA - Not Applicable

- 0 Children 5 11
- 1 Children 12 14
- 2 Children 15 and older.

Integrating Assessment Tools into Practice: Use of Information to Help Make Decisions

Intervention Plans. Information from CANS or ANSA ratings can be used to help develop intervention plans or treatment plans. For very young children, identified strengths can be used to help address needs. For older children and youth, identified strengths can be used to develop resiliency. Building strengths can also help mediate the impact of behavioral health needs on an individual's functioning. Consider the behavioral/emotional needs, functioning and risks of the child as well as the caretakers' needs and strengths in developing an intervention plan.

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Using the Decision Models. At the direct service level, recommendations from the decisions models are used to making decisions about the appropriate intensity of services, communicating with the child and family, other child service systems and funding sources. Eligibility for the Community Alternative to PRTF Medicaid Demonstration grant is determined using the 5 to 17 CANS.

At the system level, information based on the needs of Hoosiers can help allocate resources and identify gaps in resources. For example, during SFY2007, a profile of the intensity of need for behavioral health services for youth in Indiana emerged. The following report from IBHAS reflects the intensity of services for youth, 5 to 17, who had an initial comprehensive assessment between July 1, 2007 and April 30, 2009.



Behavioral Health Decision Model Recommendations

For Assessment Completed Between 7/1/2007 and 4/30/2009

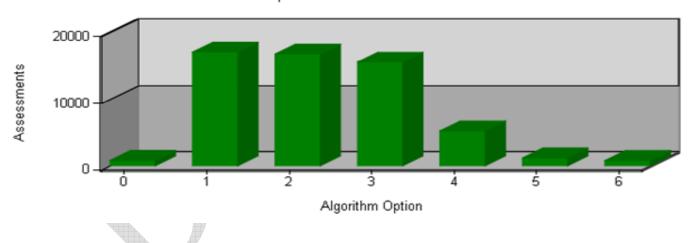
Initial Assessments Only

CANS Comprehensive 5 - 17

Mental Health

Level	Option	Assessments	%
0	No Treatment Recommendation Determined	790	1.3
1	Outpatient - Counseling, Therapies, Meds	17094	29.7
2	Supportive Case Management	16805	29.2
3	Intensive Case Management, Day Treatment, Intensive Outpatient	15592	27.13
	Services, Home Based Services		,
4	Intensive Community Based Services - Wraparound Teams	5260	9.1
5	Community Alternative to Psychiatric Residential Treatment (CA-	1153	2.0
	PRTF) Grant		ı
6	Psychiatric Residential Treatment Facilities (PRTF) or CA-PRTF or	773	1.3
	State Hospital (SOF)		
	Total Assessments	57467	100

CANS Comprehensive 5 - 17 - Mental Health



For additional information or questions about CANS Training and Certification or Indiana's implementation of these tools, contact: Betty.Walton@fssa.in.gov

DARMHA Registration

CANS/ANSA Training and Certification

Individuals who use the CANS and ANSA Tools must be trained and certified annually. Separate CANS and ANSA certification is required. For the CANS tools, certification on either the Birth to 5 or 5 to 17 tools enables users to use all CANS tools.

Annual certification helps ensure reliable use of the tools and communication with families, youth, and other service systems. CANS/ANSA training is available in three ways: web-based training and certification, training hosted by provider SuperUsers (local trainers/implementation specialists) with certification on a website, or live trainings with Dr. Lyons. Beginning in SFY2010, SuperUsers will be required to participate in at least one of 10 Booster sessions and to be recertified at a .75 level. Four open trainings with Dr. Lyons for new SuperUsers are planned for SFY2010.

Indiana has approximately 700 local SuperUsers trained and certified to support the Indiana CANS/ANSA implementation. In April 2009, 6500 to 7000 individuals were certified to use the CANS and/or ANSA tools in IBHAS.

Training Tips:

- Limit training to small groups of no more than 20-25.
- Trainees need the opportunity to practice in small groups of 3 to debrief the vignette and recommend ratings with a SuperUser.
- At least two practices with this support are likely to increase successful certification with the online test vignettes.
- A review of the critical, more difficult to rate items by the SuperUsers is suggested.
- Remind the trainees of the vignette assumptions: Assume a complete assessment has been done. If <u>no</u> information about an item appears in the vignette, assume there is <u>no</u> evidence of that need or strength.
- Soon after live training, visit the Communimetrics Training/Certification website and take the certification test. Make and keep a copy of your verification of certification.

Communimetrics Training/Certification Website

The training/certification website is http://www.communimetrics.com/CansCentralIndiana/

The Communimetrics Website is the **second** website that is supporting Indiana's use of the CANS and ANSA. The website provides training, practice and certification testing and a certification database for the CANS Birth to 5, 5 to 17 and ANSA tools. Allow 4 to 6 hours to complete the online training and certification.

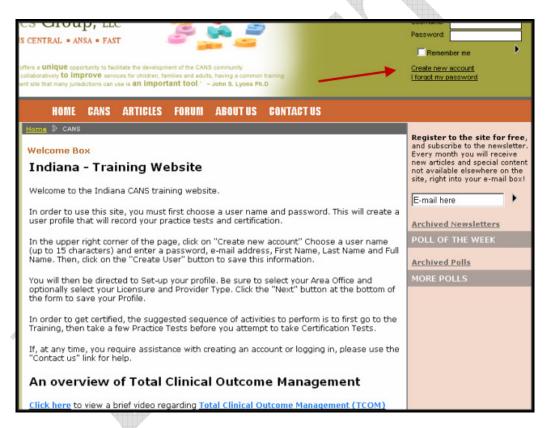
- First create an account, identifying your employer.
- Remember your user name and password.
- Under Training, view the Video Clips for the CANS or ANSA.
- Practice using the CANS or ANSA with vignettes (stories).
- When you achieve .70 reliability level, take a certification test.
- Print and keep verification of your certification.
- Having trouble? Contact a local SuperUser for assistance.

Training Website Enhancements

- In April 2009, the Communimetrics website added a video clip about how to use information from the CANS or ANSA to support decisions, monitor progress and improve quality at the direct service, program or agency and state system level. This brief Total Clinical Outcomes Management (TCOM) video is available without logging into the website.
- Closed Captioning will be available in the Communimetrics video clips effective SFY2010.

Getting Started

The first page of the website welcomes and invites visitors to register. http://www.communimetrics.com/CansCentralIndiana/Default.aspx

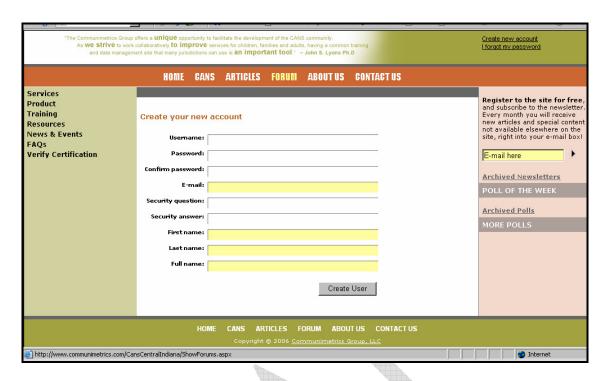


Create your account. On the upper right side of the page,

• Click on "Create New Account" to enroll.

All the information needed to utilize the site is included in the text areas. Please read the instructions carefully. If, at any time, you require assistance with creating an account, logging in, or using the Communimetrics website, please use the "Contact us" link for help.

If you continue to have difficultly after 24 hours with the Communimetrics site, contact the DARMHA Help Desk at 317 232-7925 or darmha@fssa.in.gov



Create your account.

- Select a username and a password that you will remember. Write it down for future Re-certifications!
- Enter all the information requested, especially employer.
- When complete, click on the "Create User" Button.

The next page asks for specific information about you in order to create your user profile. It is important that you identify your agency. If you work for one of the Indiana Community Mental Health Centers or State Hospitals, find the name of your agency/hospital on the list. If you work for another agency, it may be listed. If your agency is not listed, contact darmha@fssa.in.gov and ask that your agency be added. DARMHA Help Desk phone: 317 232-7925. The DARMHA Help Desk will communicate the agency information to Communimetrics.

Once your user profile is set-up, you are ready to begin training. Allow 4 to 6 hours to view the videos, practice using the CANS with vignettes and take the certification test.

To view the video clips, you need a computer with a high-speed internet connection. If you do not have a high-speed connection, the videos may be viewed using a CD supplied to your agency. For a CD, contact darmha@fssa.in.gov

Technology Requirements for Web-based Training/Certification Website to view & hear video clips.

Operating System: Windows 98, ME, NT, 2000, or XP

Software: Windows Media Player 7.0 or later. Use Media Player 9 or later for optimal playback.

Browser: Microsoft Internet Explorer 5.0 or later.

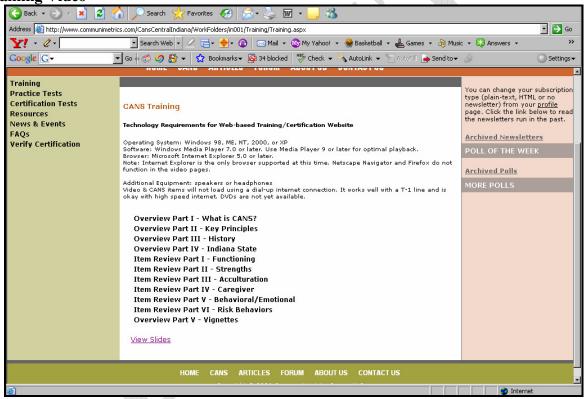
Note: Internet Explorer is the only browser supported at this time. Netscape Navigator and

Firefox do not function in the video pages.

Additional Equipment: speakers or headphones:

Video & CANS items will not load using a dial-up internet connection. An internet connection of 512kbps or faster is required. Dial-up internet connections are not supported.

Training Video



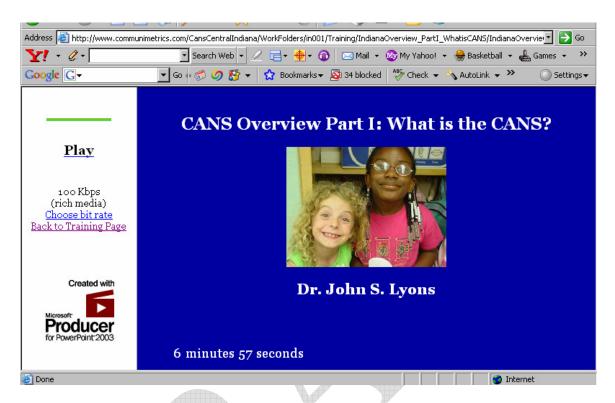
Click on "Training" on the left side of your page, to begin training. Select the CANS or ANSA tool. Video clips are provided for CANS (5 to 17), CANS (Birth to 5) and ANSA.

For each tool, a series of short videos are presented. View the videos in sequence beginning with "Overview Part I - What is CANS?" The most important video is "Overview Part II - Key Principles" which you may want to view more than once.

Slides with related information appear with the video clips.

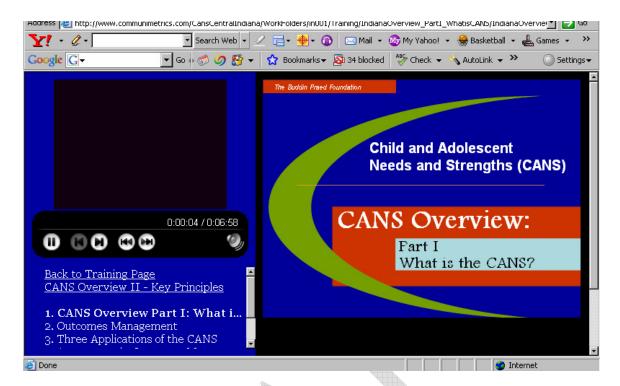
Click on "View Slides" to get the list and review each slide used in the presentation.

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The first page of the video displays the video run time. This information allows you to manage your time to minimize interruptions to your training.

If you do not wish to proceed to the video, click on "Back to Training Page". To exit "Logout".



Click on "Play", to begin the video training.

When the video begins, you will see Dr. John Lyons (or Stacey Cornett) at the left top. With your computer speakers on, you will hear Dr. Lyons discuss the topics.

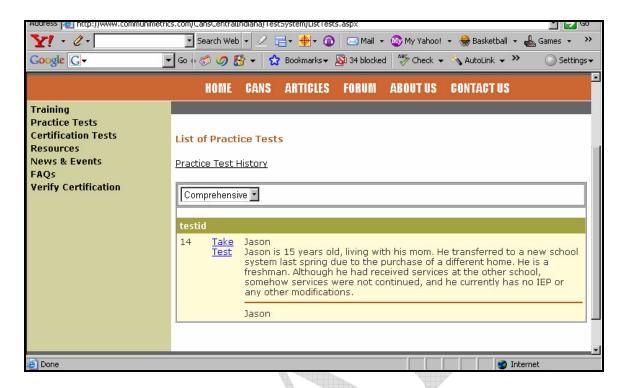
Below the picture, are buttons that allow you to navigate the video – pause, resume, forward, backward.

Below the navigation buttons is the outline of this session. You can skip ahead or go back to a section by clicking on the topic.

The slide presentations are on the right side of the page.

Once you have completed the session, you can go back to the training page or go to the next video by clicking on the text on the left side of the page.

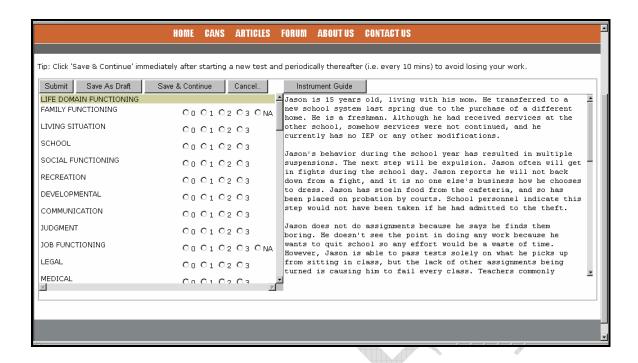
Taking a Practice Test



After completion of the training videos, you are ready to take the practice test. You can take the test as many times as needed. Rating at least two practice vignettes makes the certification test easier. When you have completed a test, a message displays your score and whether or not you have achieved a reliable score. Scores below .70 are not reliable. Please note: "Score" relates to your reliability. "Rate" refers to your evaluation of the questions regarding the consumer.

- Click on "Take Test" to begin the practice vignettes.
- Rate an **older** child (5 to 17) by using the default "Comprehensive" CANS (5 to 17).
- Rate a **young** child by selecting "0 to 5" in the drop down menu on this page.
- Rate an adult using the ANSA tool.

Vignette Assumption Tip: Assume that a complete assessment has been done. If <u>no</u> information about an item appears in the vignette, assume there is no evidence of that need or strength.

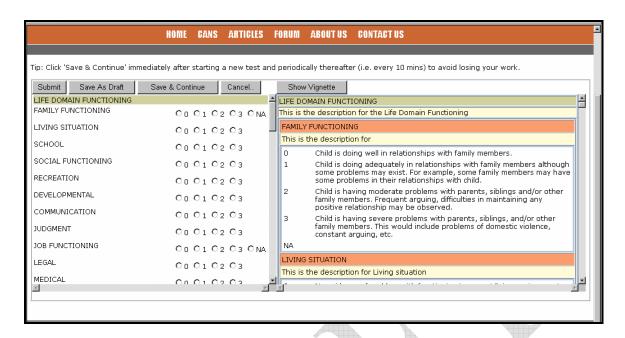


The testing page is a split screen. The questions with scoring bubbles following are on the left side of the split screen. The vignette displays on the right. After reading the vignette, you may click on "Instrument Guide" to switch to the actual CANS or ANSA tool. (See next page for this view) [You may highlight and copy the vignette, then paste it to a Word document and print for reference while you look at the Instrument Guide to rate the vignette.]

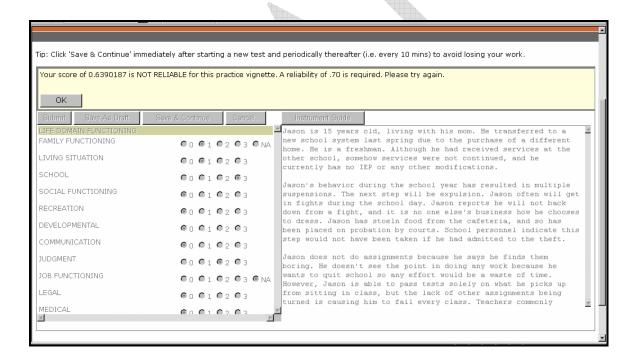
- Click on one bubble for each item to rate the item. Rate all items.
- Click on "Save & Continue" every ten minutes while rating the items. This allows you to save and return to your work in the event that you are "kicked out" of the system.

When you have completed rating all items:

- Click on "Save as Draft" if you want to return to the test later and review/correct any item(s).
- Click on "Submit" to have your scores graded for reliability.

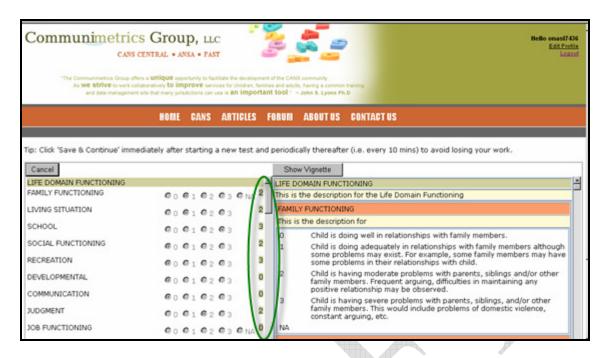


This page shows the alternate view when you click on "Instrument Guide".



After you click on "Submit" a message displays your score and whether you achieved a reliable score. If your score was not reliable, complete another practice test.

Do not try to complete the certification test vignette until you are comfortable with completing the items with "passing" reliability scores.



If you did not achieve reliability on your practice test, review the correct rating for each item. In the above page, the gray shaded numbers to the right of the bubbles indicate the recommended rating for the item. Note the difference in your rating from the correct rating. .

To access this page, click on "Practice Test History" on the Practice Vignette page. (See page 8 of this manual.)

If you are not able to achieve reliability after three attempts, contact a local SuperUser for support.

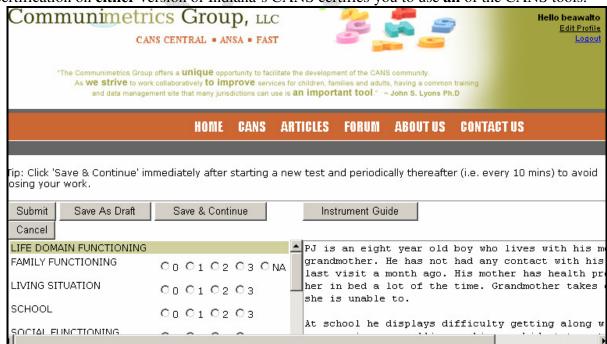
After achieving reliability, you are ready to be certified.





- Click on "Certification Tests".
- Certification Tests function like the Practice Tests as described in this manual.
- Chose the desired certification test (Comprehensive = CANS 5 to 17, 0 5 CANS or ANSA.
- Click on "Take Test" to see the vignette and begin.

Certification on either version of Indiana's CANS certifies you to use all of the CANS tools.



You can navigate between the "Vignette" and "Instrument Guide" (CANS Tool) by choosing the "Instrument Guide" or "Vignette" Buttons.

- Rate all items.
- Remember the vignette assumption on page 8 of this manual.
- "Save and Continue" about every 10 minutes. This allows you to save and return to your work in the event that you are "kicked out" of the system.
- Submit
- Good luck!!

When you submit your certification test, you receive your CANS Reliability Score instantly. Unlike the practice tests, recommended ratings are not available for review. If you have difficulty achieving certification reliability, contact a SuperUser.

<u>Certification Test History</u>. Click on "Certification Test History" to review your tests and ratings. Your Certification Number appears in this record.

<u>Verify Certification</u>. To print documentation of your certification, click on "Verify Certification" from the main menu. Please print this off for your records and also submit the hardcopy via fax to the DARMHA System Administrator along with the Individual User Agreement form for DARMHA profiles to be created. Not doing so results in delay of creating your user account. (FAX 317-234-6722)

Database/Record. A record of your certification reliability is recorded in a database by the website. Only CANS and ANSA assessments which are completed by certified users will be accepted by DARMHA.

Annual Certification Reminder: If you list an email address, you will receive a reminder 30 days prior to the date your certification expires. If you complete the CANS or ANSA on the DARMHA website, a message will display just below the banner area to remind you to complete the yearly certification. This displays 30 days prior to and 30 days after your certification expiration date. If your re-certification information has not been updated in DARMHA, prior to 31 days past your certification date, you will be locked out of the system. DARMHA also provides a Management Report so that agencies can check on when staff need to be recertified.

OTHER FEATURES on the COMMUNIMETRICS SITE (Main Menu):

Resources include:

- Training Slides from the Video Clips
- CANS Family Friendly Interview

Main Page

• Total Clinical Outcome Management Video (How information from the CANS or ANSA can be used.)

<u>Data Assessment Registry Mental Heath and Addicition (DARMHA)</u>

Originally developed as the Indiana Behavioral Health Assessment System (IBHAS) DARMHA is a web-based application to support the use of information from the CANS and ANSA tools. The interactive website provides electronic versions of the assessment tools and multiple ways of completing assessments. DARMHA uses algorithms, patterns of CANS or ANSA ratings to calculate a recommended intensity of behavioral health services and living arrangement for youth in the child welfare or juvenile justice system (who are not living with their families). For youth, the CAT may be used to help decide if acute psychiatric hospitalization or community based crisis care is indicated. The design of DARMHA enables use of common tools and processes by any state agency or non-governmental behavioral health or human service provider. Consistency of results will be maintained from all staff being trained in the same manner and using the same system. As a larger goal, implementing the CANS and ANSA tools in this website will allow the consistency and uniformity enabling all who are involved in the individual's services to be "on the same page" and "speak the same language" regarding the person's needs and strengths.

Website Structure & Security

Security and data have been organized so that HIPAA as well as state and federal laws and regulations are supported. DARMHA has multiple tiers: State Service System, Network, Provider Agencies, Provider Agency Staff and Consumers. DMHA administers the website. All DMHA contract agencies (networks and provider agencies) are grouped under the Division of Mental Health and Addiction. Behavioral Health provider agencies are grouped in the networks (if applicable) which contract with DMHA. As of July 1, 2008, networks have Read Only Access to their provider agencies information. All residential providers, not already registered under DMHA, are grouped under the Department of Child Services. Several mechanisms are in place to protect each provider agency's information. Individual's assessments can be shared by obtaining appropriate written consents and the provider which completed the assessment sharing with the party requesting the assessment.

Registering with DARMHA

To maintain the security and privacy of data, the application requires a username and password to be set up. This is done through a registration process that enables providers to identify who and how they want to interact with DARMHA. Each organization must designate authorized users who will be issued usernames and passwords. There are six main categories of users within the system:

- Certified Clinician/Non-User: These individuals are setup in the system so that they can be referenced as administers of the assessment tools, but are unable themselves to log in and enter data.
- Certified Clinician/User: These individuals are both certified to administer an assessment to a consumer, as well as, have access to the system to enter data.

- Non-Certified/Data Entry User: These individuals are granted access to the system to enter data about consumers and assessments administered by other Certified Clinicians, but they themselves will not be eligible to administer a tool.
- Read-Only/Management: These individuals will have the ability to view data only and generate a variety of reports on their organizations data.

Based upon the user's category, they may be configured with certain additional rights when interacting with the system. Below are some examples:

- Clinician/Certified CANS User: These individuals have access to all 5 CANS tools (2 comprehensive, 2 reassessments, and 1 crisis). These users have access to the online assessments tools through an interview and rapid-entry modes, but not to the import/export feature. These users have access to all provider reports for their organization.
- Clinician/Certified ANSA User: These individuals have access to the ANSA tool. These users have access to the online adult assessment tool through an interview and rapid-entry modes, but not to the import/export feature. These users have access to all provider reports for their organization.
- Clinician/Certified CANS/ANSA User: These individuals have access to the CANS and ANSA tools. These users have access to the online adult assessment tool through an interview and rapid-entry modes, but not to the import/export feature. These users have access to all provider reports for their organization.
- Data Entry/Import and Export: These Data Entry/Import & Export Role has access to the rapid-entry mode of all 5 CANS and ANSA tools. They have access to the import/export feature and to all provider reports for their organization.
- Read-Only/Management: These individuals can view all data specific to the provider. They do not have access to the CANS and ANSA tools or the import/export feature. These users have access to all provider reports for their organization.
- Read-Only/Network. These individuals can view all data specific to network provider members. They do not have access to the CANS and ANSA tools or the import/export feature. These users have access to all provider reports for provider organizations in their network.

DARMHA registration documents are located: http://ibhas.in.gov/mainDocuments.aspx
Please submit your hardcopy certification along with the registration form, not doing so will result in delay of creating your user account. Acceptable certification:

- 1. Copy of Verification from Communimetrics website
- 2. Copy of dated certificate signed by Dr. Lyons
- 3. Copy of email from Dr. Lyons
- 4. Copy of dated paper scored CANS/ANSA from live training (from Dr. Lyons to DMHA)
- 5. Copy of written signed, dated documentation of certification from Dr. Lyons-live training events

The agency's or network's director must sign the Provider Site Enrollment Form designating the agency's primary contact with the DARMHA Help Desk, the individual authorized to determine the level of access for the agency's employees. Fax Forms to DARMHA Support at 317 234-6722.

Website Description

The DARMHA website is described by grouping parts of the website into sections that provide specific functionality (e.g., searching for a consumer). The security and access to different parts of the website is maintained by the DARMHA Support Center (darmha@fssa.in.gov) and implemented in the website "behind the scenes". That is, different users will be able to access different parts of the website based on the security profile that is created during the registration process. In fact, some users may have different menu options than others. Contact the DARMHA Support Center regarding questions so that the administrator can review the user's current security profile in context with the question. The following sections describe each section of the website in more detail.

Application Browser Support

Browsers Tested and **Supported**:

Internet Explorer 6.01 and 7

Browsers that **may work**:

Internet Explorer 8

Mozilla Firefox 2.x and higher

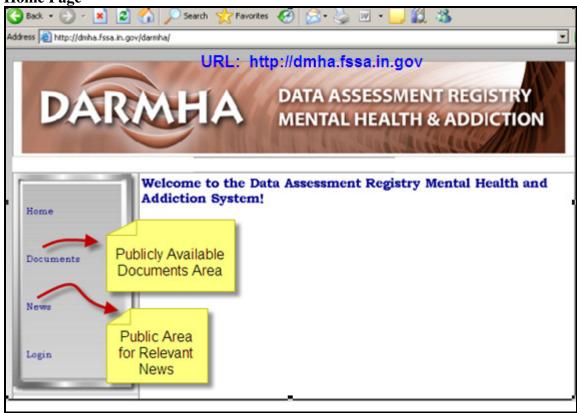
Opera 9.x and higher

Browsers that **do not** work:

Safari, Chrome

To provide general information about Data Assessment Registry Mental Health & Addiction (DARMHA) and be a central place for relevant documents, the home page, news and documents pages are available to anyone on the Internet. Although this area may be expanded as appropriate, it will always contain the official and current versions of all the assessment tools as well as current training options. The web address or URL is: https://dmha.fssa.in.gov/darmha

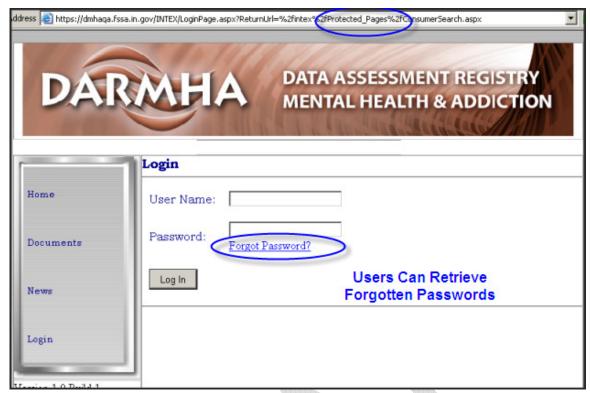
Home Page



Secure Login

The last menu option on the home page is the login page. Your username and password are determined during the registration process and details are contained in that documentation. If there are questions regarding your username, password or user profile, contact the DARMHA Support Center darmha@fssa.in.gov

Logging in uses 128-bit encryption via a secure certificate from Verisign and the Secure Sockets Layer (SSL). While navigating within the website from this point on, all data is encrypted. Security is also maintained via Microsoft ASP.net 2.0 Forms Authentication so no one will be able to access any web pages without being officially logged in.



Login

Did you forget your password?

On the login page, a link is provided to retrieve a forgotten password.

- Click on "Forgot Password?" Enter your username. If you entered your username to login, it displays.
- Click the "submit" Button.
- Your "secret question" displays.
- Enter the "secret answer".
- Click the "submit" Button.

Note: If either the username or answer to the secret question is incorrect, a message displays on the page to re-enter the correct information or contact the Support Center. Once the username and secret answer are both correct, an e-mail is sent to the user's address that was entered in the user profile during the registration process.

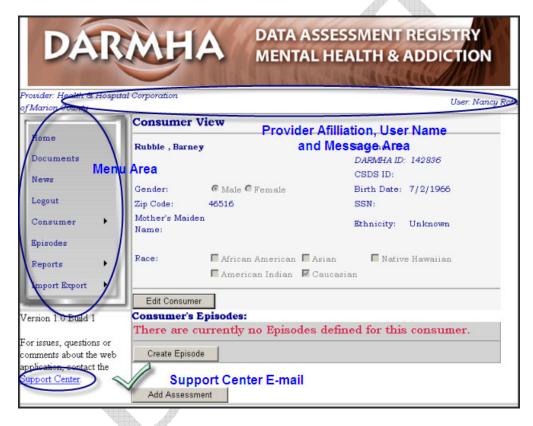
General Page Layout

All pages in the website follow the same basic layout.

- Just above the menu area and below the banner is an area that displays your username and your provider organization.
- The center of this section is reserved for short messages. An example of a message is a reminder that the user needs yearly certification. Specifically, the reminder displays 30 days prior and 30 days after the user's certification expiration date. Other messages may be developed in future phases.

- On the left side of each page, you will find the navigation menu.
- At the bottom left underneath the menu area, the current version of the website displays along with a link to the DARMHA Support Center.
- The area to the right of the menu displays the content for each page.

When developing the website, it has been sized to accommodate many different screen resolutions. Therefore, a page may have more or less space to the right depending on the user's display options. This menu is dynamic in that various options will be visible based on your profile. Therefore, it is possible for two different users working with the same provider to see different menu items. If there are questions regarding the menu items or user profile, contact the DARMHA Support Center



Consumer Search

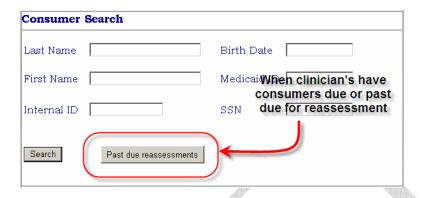
After a successful login, the Consumer Search page displays. You must **always** search for a consumer before adding the consumer's information (to avoid possible duplicates).

You can search on several different pieces of data (in combination or separately). You may also enter partial information into the First and Last Name boxes to help limit your search. An example may be the consumer's first initial and a birth date. When you enter the criteria into the text box (e.g., entering information into the "Last Name" box) and click the "Search" Button, all matching consumers for which the user is allowed to view display by Last Name, First Name and Birth Date. To protect consumer privacy, the search feature finds only the consumers that match your provider.

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Consumers Due or Past Due for Reassessment

Whenever a clinician logs into the system, if the clinician has one or more consumers that are due for reassessment within the next 150 and 210 days, the system provides an alternate button which presents a rapid list of those consumers in need of reassessment.



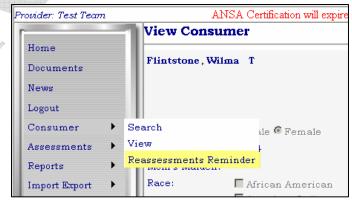
The grid displays the consumers currently in need of reassessment whose last assessment was performed by the clinician logged in. No other consumers who are in need of reassessment are

presented.

*For information pertaining to consumers within the organization needing reassessment use the Reassessment Report.



This grid works the same as a normal Consumer Search works in that the user may click on the "View" link to jump to the appropriate consumer's record. The grid also displays consumers the number of days before the 180 day target reassessment. Negative numbers mean that the consumer is "technically" past due for reassessment. If the clinician has multiple consumers listed at any given



time, they may sort the grid by any of the column headings listed in the grid.

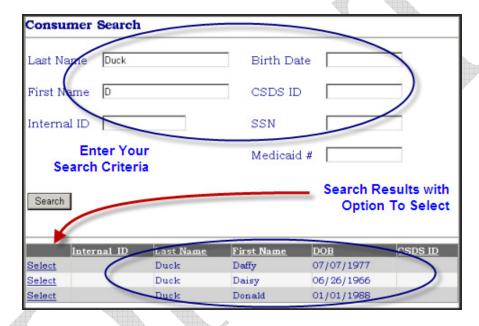
The user can easily return to this page by selecting the "Reassessments Reminder" menu option under the "Consumer" menu tier. This option is available even when there are no consumers eligible for reassessment, however, no information will be displayed.

How do I find a Consumer?

The most accurate search is on one of the unique IDs: Internal ID, SSN, CSDS ID or Medicaid #. You may search on one or all of these fields:

- Last Name
- First Name
- Birth Date
- Medicaid ID
- Internal ID
- SSN
- CSDS ID

Tip: Enter first letter of last and first name and DOB.



Search Results

After you have entered your search criteria:

- Click the "Search" Button.
- Results from **your provider organization** display. All consumers matching the criteria display. Therefore, if there are two "Robert Smith's" both display. The search criteria also searches for similar names (to account for misspellings and/or key transpositions).
- The initial display includes: Internal ID, Last Name, First Name, Birth Date, and the CSDS #.

If the consumer is not displayed, you can enter different and/or additional information and search again.

• Click the "Select" Button to display the consumer's demographic information to verify the correct consumer is chosen

From "View Consumer", you have the theseoptions

- Edit the consumer demographic information
- Select an Episode.



View Consumer

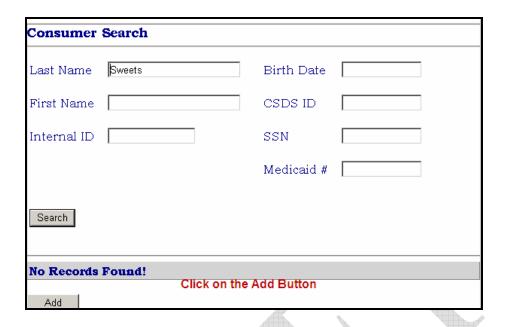
Edit Consumer Information

To edit an existing consumer:

- Click the "Edit" Button to change or add information about the consumer.
- Click the "Update" Button to save the information.
- Click the "Cancel" Button, if there are no updates.

No Records Found

If the consumer search is unsuccessful, "No Records Found":



- Click the "Add" Button to enter a new consumer.
- Enter the data
- Click the "Insert" Button to save the information.
- Click the "Cancel" Button to cancel, "not save".

Note: Any demographic information entered in the search fields automatically populates the Add Consumer page.

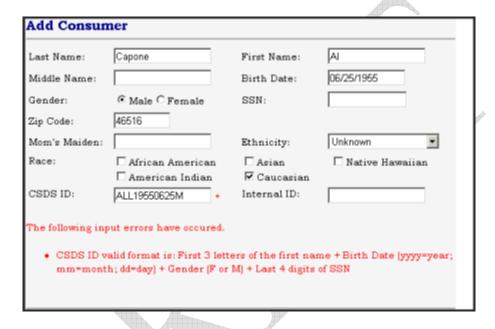
Consumer Demographics

Consumer demographics are straightforward, whether in "Add" or "Edit". However, there are a few items to note when entering this information.

- Last Name
- First Name
- Middle Name
- Birth Date
- Gender
- SSN Optional. –. The Social Security Number to be entered when feasible. It helps to differentiate consumers with the same or very similar demographic information. The format is: ###-###.
- Zip Code
- Mom's Maiden Again, this helps to differentiate similar consumers.
- **Ethnicity** Following federal Census Bureau standards, Hispanic ethnicity is separate from the consumer's race. Required for HAP consumers.
- Race The options given are consistent with the Census Bureau standards and allow the consumer to identify multiple races if it is applicable (e.g., part Asian and part Caucasian).
- **Internal ID** This is the id that uniquely identifies the consumer in your system. This can be any combination of text and numeric characters.

• **CSDS ID** – This is the unique 16 digit CSDS Identifier

This assists with integration to/from providers' electronic medical record or case management systems. While it is not a requirement to enter data into this field on this web page, it is highly recommended that the appropriate data be entered for each consumer. If there are questions regarding the use of this field and data, please contact the DARMHA Support Center.



Incorrect Input

Fast Track

Fast Track is the *process* by which our partners that use DARMHA for the assessment module only will add/update assessments. The application will trigger the creation of a "simple episode" when a new assessment is added. Our providers may also use this *process* when an assessment is the first step in determining treatment prior to opening an episode of care.

- A "Simple Episode" is a record that contains an Episode Start Date, the date of the Initial Assessment; and an Episode End Date, the date of the Transition/Discharge Assessment.
- These dates are automatically provided by the application
- Medicaid Enrollment and RID number, if appropriate, are populated by the application.

How do I Add an Assessment?

Once the consumer is either found or added to the system, you can add an assessment. When adding an assessment, the consumer's name displays as part of the heading for this section. This helps you verify you are working on the correct consumer.

• If this consumer **has just been added**, click on "Add Assessment" Button at the bottom of the Consumer View. If you "mouse over" the "Add Assessment" Button, you will see a message "Will automatically create a simple Episode".



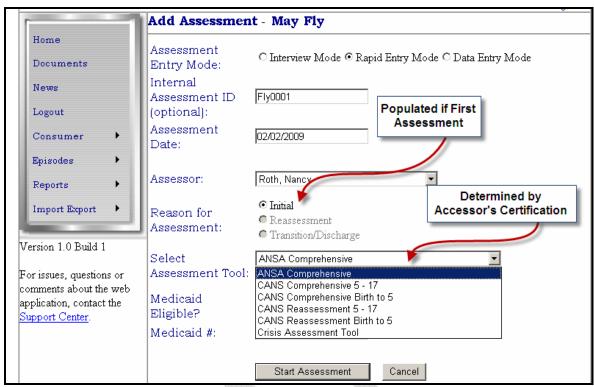
• If this consumer has a **closed Episode**, "click on Add Assessment" Button at the bottom left of the Consumer View.



• You must complete the Assessment Options (some options may be disabled or 'grayed out' based on your user profile).

Assessment Options

- Assessment Entry Mode
 - Rapid Entry Mode This option assumes that the clinician has completed the assessment instrument on paper. This option provides a more compact and quicker method of data entry.
 - o Interview Mode This option provides the full text from the assessment instrument along with the questions and possible answers.
 - Data Entry Mode This option is available only to Data Entry personnel who request
 the option to key in the scores for all of the answers rather than click on the radio
 buttons.
- Assessment Date
 - Enter the date when the assessment was administered. This is not necessarily today's date. Once this date is entered you will be able to select:
- Assessor
 - Select the person who performed the assessment. Depending on the user profile, this may be disabled or may provide a 'drop-down list' of certified clinicians.
- Reason for Assessment
 - The three options of Initial, Reassessment and Transition/Discharge indicate when, in the context of treatment, the assessment is being performed. If this is the first assessment, "Initial" is locked.
- Select Assessment Tool
 - There are multiple assessment instruments for younger vs. older children as well as
 different circumstances (e.g., crisis). All options are displayed. Please refer to the
 "Documents" area of the website for specifics regarding each assessment tool.
 - o NOTE: Assessment tools listed will only be the tools associated with the selected clinician's certification.
- Medicaid Enrolled?
 - o Click on "Yes" or "No" as appropriate.
- Medicaid #
 - If the consumer is Medicaid Enrolled, then the 12 digit Medicaid Number (RID) is required.

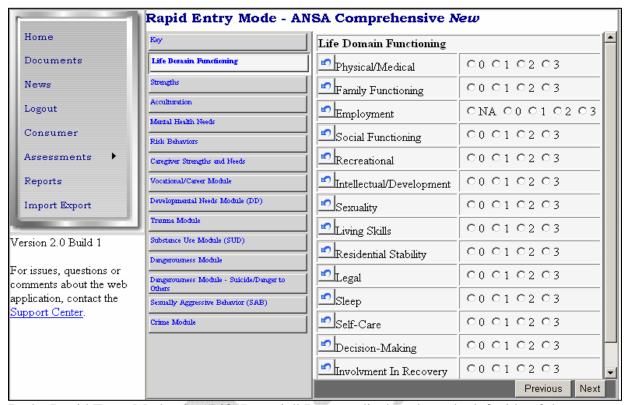


Start Assessment

• Click the "Start Assessment" Button.

The next page displays the necessary questions and answer options based upon the criteria selected. In the all of the "Modes", the "Life Domain" buttons display along the left side of the page next to the website menu. Each button corresponds to a section/domain of the assessment.

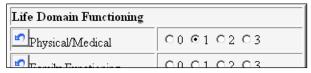
Rapid Entry Mode



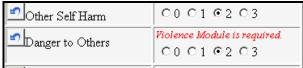
In the Rapid Entry Mode, the "Life Domain" Buttons display along the left side of the page next to the website menu.

To Begin the assessment:

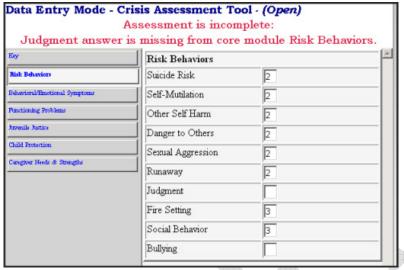
- Click the first of the "Life Domain" Buttons, on the left or you can use the "Next" or "Previous" Buttons for Navigation.
- If you accidentally checked Rapid Entry, you can change mode to Interview or Data Entry, by clicking the button at the bottom of the screen.
- The rating values display with the Domain header.
- Click the rating "bubble" as indicated on the scoring sheet. If you click the "wrong" bubble, click the "correct" rating and the "wrong" entry is removed.
- If you score a question and you wish to remove the score completely, select the reset button beside the question listed.



- This feature is available in both the Rapid Entry and Interview Mode pages.
- Some answers require the completion of an extension module. If so, a message displays indicating the required module.



• If you leave a question unanswered, a specific error message displays. Use the "Next" and "Previous" Buttons to scroll to complete the Module containing the unanswered question(s).



Incomplete Assessment

- Click the "Process/Save Assessment" Button to save an unfinished assessment at any time. The data is saved and you can login at any time to complete. Be sure to make note of the consumers' name.
- Click the "Cancel" Button if you started an assessment unintentionally and do not want to save any of the data.
- To save the assessment for <u>review</u>, prior to activating the decision support threshold process, click the "Process/Save Assessment" Button. The application returns to the "Consumer Assessment View" page. The assessment is "open" and available for review, by selecting a "Mode" or "Print a Report".



Review your entries for accuracy

It is highly recommended that you take the review action.

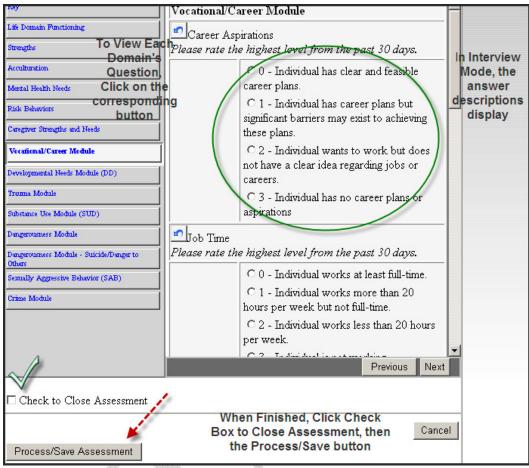
- Click on "Print", for a report; OR
- Click on one of the "Modes", Interview, Rapid or Data Entry, to scroll through your entries
- If you select the Rapid or Data Entry Mode, you can switch modes, in the Interview Mode you cannot.
- In any mode you can scroll through the assessment domains, and verify your entries.
- If any of your entries are incorrect, you can make a correction. If you select "Print" for a report, you can use that format to verify your entries. Once an assessment is "closed", it cannot be modified. Closed assessments are a part of the permanent record.
- If an assessment has been duplicated or it is determined that there is no reason to complete the assessment; users can delete incomplete or "open" assessments. A button below the mode switch buttons and save button allows you to perform this action. Assessments that are deleted are completely removed from the system. There is no retrieving the information.



Interview Mode

Interview Mode has the same functionality as Rapid Entry Mode. The only difference is the information display. Each question corresponds to a section or domain of the assessment displays. By clicking the Domain Heading questions on left, each domain's questions can be viewed and answered. Also, "next" and "previous" navigation buttons at the bottom of the page allow the user to navigate through the assessment in a "wizard-like" format. Some questions may trigger an extension module within the assessment (e.g., "Juvenile Justice (JJ) Module"). If an answer to an earlier item requires that additional sections must be filled out, a message displays next to the question indicating which module is required.

.



Interview Mode

Data Entry Mode

This option is available to data entry personnel who prefer to key the data into the text fields rather than clicking on the radio button options.

Data Entry Mode provides the user with the ability to select a "N/A Not Applicable" option in certain cases, and additional validation

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Key	Life Domain Functioning		
Life Domain Functioning	Physical/Medical	1	
Strengths	Family Functioning	1	
Acculturation	Employment -		
Mental Health Needs	Vocational/Career Module is required.	1 □ Not Applicable	
Risk Behaviors	Social Functioning	2	
Caregiver Strengths and Needs	Recreational	2	
/ocational/Career Module	1		
Pevelopmental Needs Module (DD)	Intellectual/Development	<u> 0</u>	
Trauma Module	Sexuality	0	
dubstance Use Module (SUD)	Living Skills	4 Accepts only 0 - 3 values.	
angerousness Module	Residential Stability	1	
Oangerousness Module - Suicide/Danger to	Legal	1	
Sexually Aggressive Behavior (SAB)	Sleep	0	
Crime Module	Self-Care	1	
	Decision-Making	0	
	Involvment In Recovery		
		Previous Nex	

is required if a key error is made.

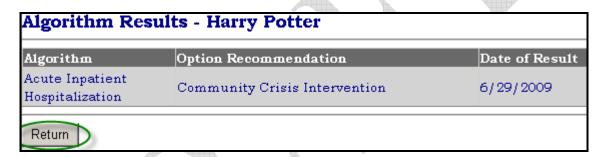
To remove a value from a field, place the cursor in the field and press the backspace or delete button on the keyboard.

If you accidentally checked Data Entry, you can change mode to Interview or Rapid Entry, by clicking the button at the bottom of the screen.

Decision Model Analysis

The Decision Support Model analysis process automatically analyzes all the assessment ratings and processes the data through a pre-determined logic "tree" to identify a recommended intensity of services or placement. When the process is complete, the recommendation displays on the next page and is saved with the assessment information. To run the decision support algorithms, both steps in the following order, must be complete.

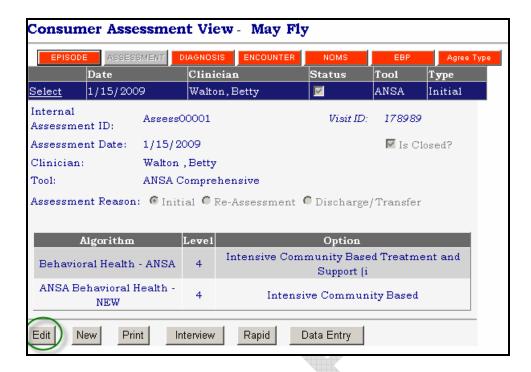
- **First** click on "Check to Close Assessment" checkbox.
- Then click the "Process/Save Assessment" Button. "Option Recommendations" Display.
- Then click the "Return" Button. These next three steps allow you to print the report; and edit the header.



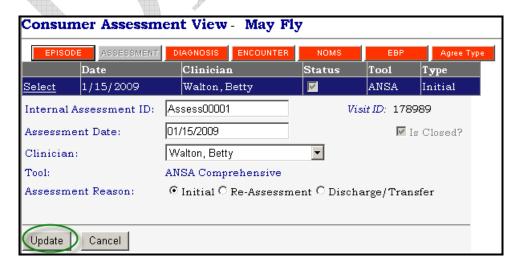
• Then click the "Select" Button.



The Consumer Assessment View Displays



- **Print Report.** An individualized report for each individual can be printed or exported for the individual's clinical record. It includes ratings for each item and the decision model recommendations. Clinicians: Families need this information soon after completing the assessment. This report is required to document eligibility for the CA-PRTF Medicaid Demonstration Grant.
- Mode. If you click on any of the Assessment Modes; you will return to the Assessment Screen. There is a "View" button. If you click on it, you can scroll through the answers on the closed assessment.
- Edit. You can modify the Assessment Header.
- First Click on the "Edit" Button.
- Make the corrections.
- Then Click on "Update".

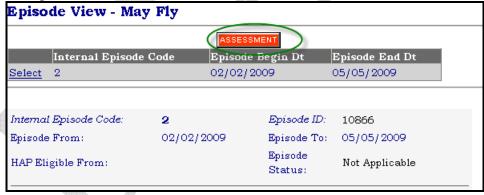


How do I Add a Reassessment?

Once the consumer is found, "Select" the open episode. (Episode End Date is blank)



This opens the Episode.



As this is a "Simple Episode', nearly all fields are completed as "Not Applicable".

Click on the Assessment Button.



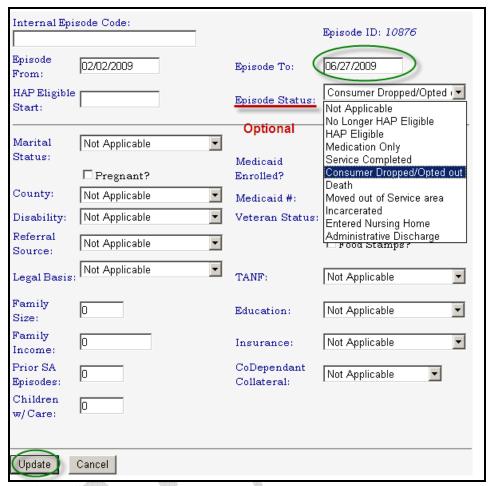
Click on New. This takes you to the "Add Assessment" page. Proceed as described in the previous sections.

How do I Close a Simple Episode?

Typically the "Simple Episode" is automatically closed when a Transition/Discharge Assessment is performed. The date of the assessment is the episode end date. Occasionally, the consumer does not return for a final assessment, and these episodes need to be closed. This consumer will appear on your reassessment reminder list.

Once the consumer is found, "Select" the open episode. (Episode End Date is blank)





Close Simple Episode

- Key the Episode End Date Date of latest interaction.
- Episode Status you may add the appropriate status if known; if not, make no changes to the field.
- Click the Update button.

How do I Add an Episode for the HAP Eligible Consumer?

The Consumer Episode data record is the framework for all of the detail data elements that define the consumer's episode of care. The Episode Start Date initiates the episode and the Episode End Date closes the episode. All Encounter, Assessment, Diagnosis, NOMS, EBP, and Agreement Funding records for a particular episode must be dated between the start and end dates of the episode. Once the demographic data is entered; and assuming that there has been no assessment, you **must** create the new Episode of Care record before you enter any of the other subjects/modules.

Once the consumer is either found or added to the system, you can add an episode of care. When adding an episode, the consumer's name displays as part of the heading for this section. This helps you verify you are working on the correct consumer.

• Click on "Create Episode" Button at the bottom of the search page.

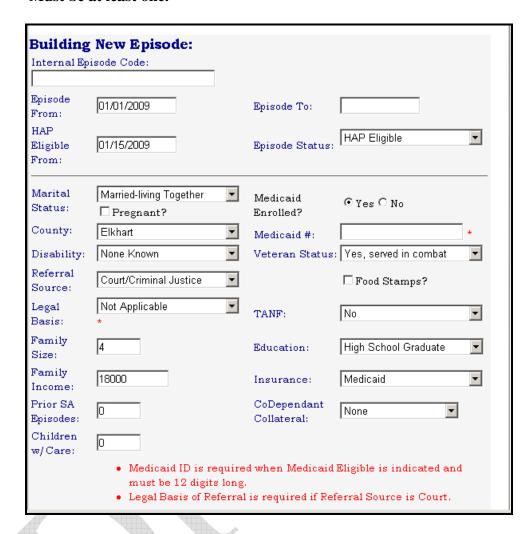


Building a New Episode

Building a new Episode is straightforward; whether in "Add" or "Edit". However, there are a few items to note when entering this information.

- Internal Episode ID Your internal application (data system) identifier used for this particular consumer.
- Episode Start Date
- Episode End Date
- HAP Eligible Start See Note
- Episode Status
- Marital Status
- Pregnant Is the consumer currently pregnant?
- Medicaid Enrolled Note: If an assessment was performed first; this field and Medicaid # populate.
- Medicaid # Required on all consumers receiving or enrolled in Medicaid.
- County of Residence
- Disability Select any additional applicable disability.
- Veteran Status
- Food Stamps Is the consumer currently receiving food stamps?
- TANF Is the consumer enrolled?
- Referral Source If referred, indicate source.
- Legal Basis Required if Source of Referral is "Court/Criminal Justice".

• Family Size - Number of individuals supported by the adjusted family income. Must be at least one.

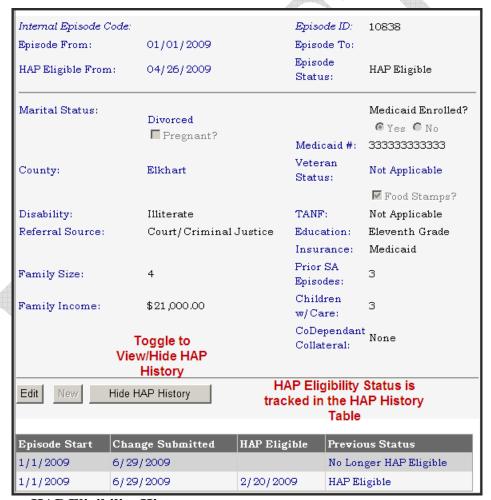


- Family Income The field expresses the family unit income as an annual value. Any individual included in the family size calculation for determining eligibility shall also have their income included in the Adjusted Family Income calculation
 - If the consumer is an SED, "family" refers to the family of the person responsible for medical bills.
 - If the state or county is responsible for medical bills, report family income as zero (0).
- Education Highest level of education completed.
- Insurance
- Prior SA Episodes The number of previous substance abuse treatment episodes.
- Children With Care The number of children receiving services or support, daycare, babysitting, counseling, medical care, etc... while the mother is in treatment.
- Co Dependant / Collateral

• To Add the Record – Click on the Insert Button.

NOTE: HAP Eligible Date is a point in time reference. Many consumers may have changes in income status that result in meeting the HAP eligibility criteria at one point in time and NOT in another. This may happen repeatedly. DARMHA provides the opportunity to change the episode status from "HAP Eligible" to "No Longer HAP Eligible" as many times as consumer income falls into and out of the less than 200% of federal poverty level. The date field "HAP Eligible Start" is used to document the date that the consumer is HAP eligible; and is removed when income levels dictate ineligibility. Eligibility status changes are captured in the HAP History Table.

Therefore, this date field may be left blank when a consumer begins treatment as not HAP eligible and is updated when the consumer becomes eligible during the episode of care.

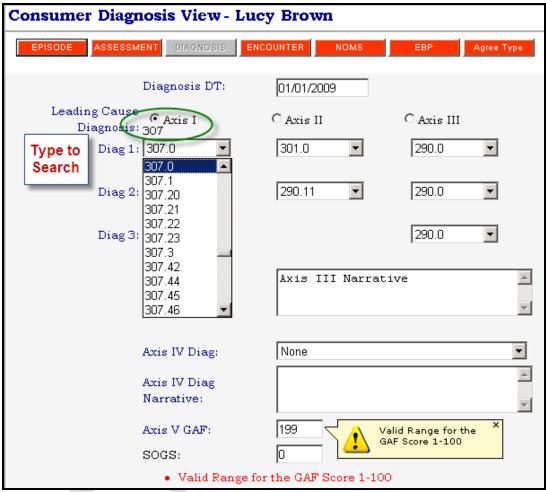


HAP Eligibility History

How do I Add a Diagnosis?

Once the consumer has an open episode of care, you can add a Diagnosis record. When adding a diagnosis, the consumer's name displays as part of the heading for this section. This helps you verify you are working on the correct consumer.

- Click on the red "Diagnosis" Button at the top of the open Episode View.
- Then click on the "New" button.



- Diagnosis DT Date the original diagnosis was made; or changed.
- Axis I Clinical disorder, including major mental disorders, as well as developmental and learning disorders. Three (3) fields available
- Axis II Underlying pervasive or personality conditions, as well as mental retardation. Two (2) fields available

Axis I or Axis II Required

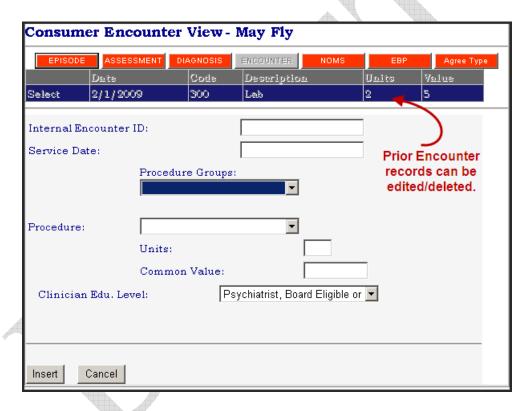
- Axis III Acute medical conditions and physical disorders; Three (3) fields available
- Axis III Dialogue Narrative
- Axis IV Psychological and environmental factors contributing to the disorder
- Axis IV Dialogue Narrative
- Axis V Global Assessment of Functioning (GAF) or Children's Global Assessment Scale (C-GAS) for children under the age of 18 (Scale of 100 to 1)

- Leading Cause Diagnosis Which of the first two Axes lists the primary or leading cause diagnosis? Select one.
- SOGS Required if Agreement Type = GAM; a score of 3 or higher is required for funding.
- To Add the Record Click on the Insert Button.

How do I Add an Encounter?

Once the consumer has an open episode of care, you can enter Encounter record. When adding an encounter, the consumer's name displays as part of the heading for this section. This helps you verify you are working on the correct consumer.

- Click on the red "Encounter" Button at the top of the open Episode View.
- Then click on the "New" button.



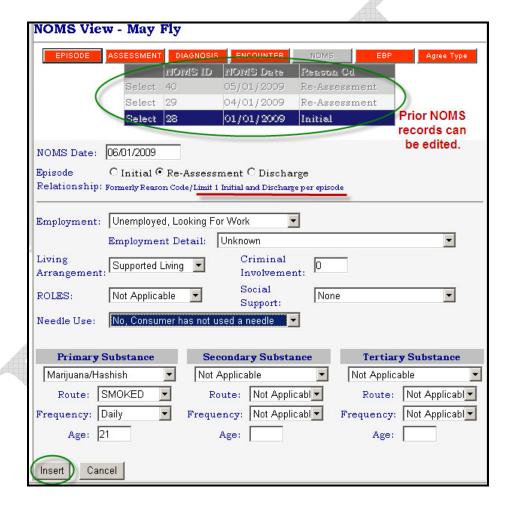
- Internal Encounter ID
- Service Date Enter the last day of the month or the last day of service during the month.
- Procedure Groups
- Procedure Code Standard CPT or HCPCS codes
- Units Must be greater than zero; no partial units; no decimals; no fractions.
- Common Value Required. Default from MRO value.
- Level of Clinician
- To Add the Record Click on the Insert Button.

You may delete an encounter with a Click on the Delete button. Please note, there is not an "Are You Sure" second step. Once deleted, it is gone.

How do I Add an NOMS?

National Outcome Measures are required for all "HAP" eligible consumers. The NOMS record is required to be submitted for all HAP eligible consumers at the start of the episode, every 180 days thereafter as long as the consumer stays in service and finally at discharge. Once the consumer has an open episode of care, you can add an NOMS record.

- Click on the red "NOMS" Button at the top of the open Episode View.
- Then click on the "New" button.



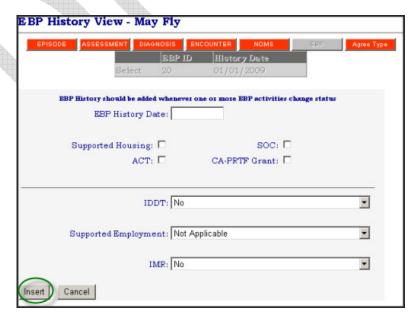
- NOMS Date
- Episode Relationship The associated event for the capturing of the NOMS History. One Initial and one Transfer/Discharge allowed per Episode. (Formerly Reason Code)
- Employment
- Employment Detail Required if Employment Status = 2, Unemployed, not in labor force (Community Only)

- Living Arrangement Consumer's current living situation
- Criminal Involvement In the past 30 days, report the number of times the consumer was arrested.
- ROLES Score (The Restrictiveness of Living Environmental Scale) Age validation
- Social Support
- Needle Use
- Primary Substance Substance Use/ Abuse Codes Required, if Agreement type is CA
- Primary Route Primary Route of Substance Ingestion. Required Field if Agreement type is CA
- Frequency of Use Required, if Agreement type is CA
- Age (of First Use) Required, if Agreement type is CA, Age validation
- Secondary Substance Substance Use/ Abuse Codes
- Secondary Route
- Frequency of Use
- Age (of First Use) Age validation
- Tertiary Substance Substance Use/ Abuse Codes
- Tertiary Route
- Frequency of Use
- Age (of First Use) Age validation
- To Add the Record Click on the Insert Button.

How do I Add an Evidence Based Practice?

Once the consumer has an open episode of care, you can add EBP History whenever one or more EBP activities change status.

- Click on the red "EBP" Button at the top of the open Episode View.
- Then click on the "New" button.



- EBP History Date
- Supported Housing
- ACT Indicator, if ACT is yes, then agreement type must be SMI.
- System of Care Indicator
- CA-PRTF Grant
- IDDT Integrated Dual Diagnosis Treatment
- Supported Employment
- IMR Illness Management and Recovery
- To Add the Record Click on the Insert Button.

How do I Add an Agreement/Funding Type?

Once the consumer has an open episode of care, you can add an Agreement/Funding Type record. When adding an agreement type, the consumer's name displays as part of the heading for this section. This helps you verify you are working on the correct consumer.

- Click on the red "Agree Type" Button at the top of the open Episode View.
- Then click on the "New" button.



Building a new Agreement/Funding Type is straightforward; whether in "Add" or "Edit". However, there are a few items to note when entering this information.

- Agreement History Date If the agreement type = SED, then the consumer's must be less than 21. Validated
- Agreement If Agreement Type = CA then, NOMS primary substance is required.
- Special Funding Type If SMO, agreement type must be CA.
- SOF Indicator If yes, then must have SMI Agreement type.

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- Change Code
- To Add the Record Click on the Insert Button.

Reports

Several reports are available to display individual consumer information, aggregated provider-level information or outcomes. Each report has common features that are controlled at the top of the report. Below is a description:

- Navigation arrows with page numbers enable users to navigate to the next/previous page or skip to a particular page.
- Users can adjust the size of the report on the screen by using a drop-down box with various options (e.g., 100%, page width, whole page, etc...)
- A text-box with the "Find | Next" link beside it allows users to search for particular words in the report.
- The "Export" link below the navigation arrows allow users to select a format type from the drop-down box, click the "Export" link and have the report display in the format selected.

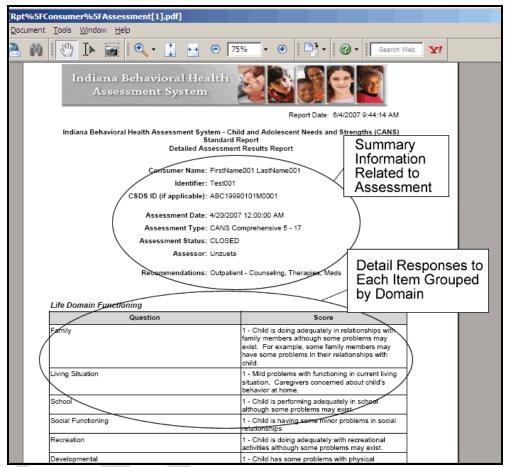
Individual Report

The individual report lists all assessment item scores and decision model recommendations for intensity of services or placement. This is accessed through the View Consumer page (accessible from the menu: "Consumer" -> "View"). For the selected consumer, each assessment is displayed in a grid below the consumer information, a "report" link is provided in each row.



View Consumer Screen to Run Individual Report

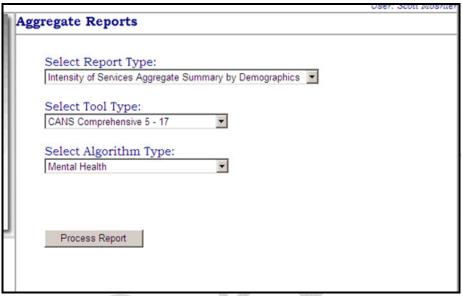
A sample of the report is shown below. The top portion of the report displays summary information including their identifying information, assessment date, the assessment tool used, assessor's name (certified clinician who performed the assessment) and the decision support recommendation.



Sample Individual Report

Aggregate Reports

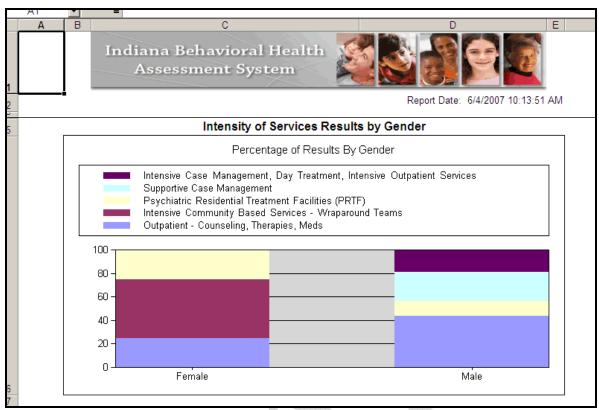
The summary or aggregate reports for each provider is accessible from the "Reports" menu item on the left side of each page, select the "Aggregate Reports" link to display a page with options to run different reports. Users can select the type of report, type of assessment tool to include and type of decision support threshold to include. Users then click the "Process Report" button to generate the report in the standard format.



Aggregate Reports

- Intensity of Services Aggregate Summary by Demographics report: This report displays the recommendation level from the Intensity of Services decision model and groups by several demographics.
 - o This report combines all consumers assessed with the assessment tool selected.
 - This report displays the decision support model recommendations for the "algorithm type" selected. This can be the "Mental Health" intensity of services model, "DCS Placement" model or the "Acute Inpatient Hospitalization" model (note: this option is valid for only the CANS Crisis assessment tool).
 - The report displays the results in graph and table format grouped by age group, race, ethnicity and gender.

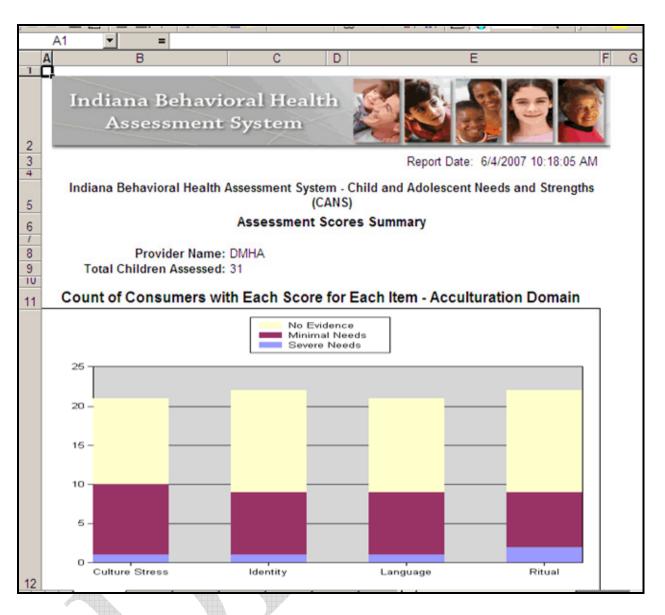
A sample of one of the report pages is shown below:



Sample Aggregate Report of Recommendation by Demographics

- **Initial Assessment Scores by Demographics report:** This report displays a summary of assessment scores for all consumers assessed by the provider for the selected assessment tool and selected "algorithm type".
 - o The report displays a count of each score reported on the assessments in graph and table format grouped by age group, race, ethnicity and gender.
 - O Since many children and youth will not have the "Child Welfare/Juvenile Justice Placement" algorithm processed for their assessment, it is recommended that the "Mental Health" option is selected unless you are interested in this subset of the population.
 - O Note: Due to the length of this report, exporting this report to .pdf creates a large file size. These reports can be printed directly from the web without downloading.

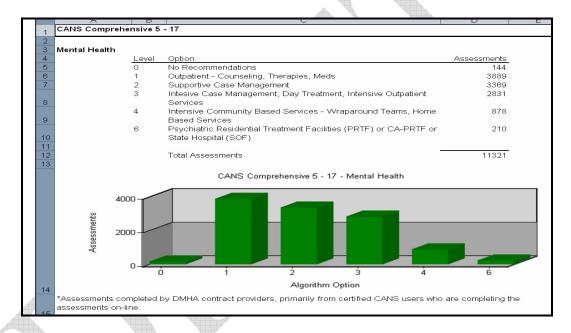
A sample of one of the report pages is shown below:



Aggregate Report of Individual Scores

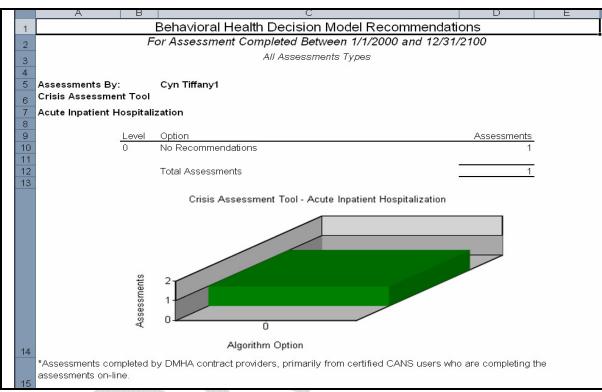
Decision Model Recommendations

- Statewide Aggregate Assessment Results: This report can be run across the entire state or for the user's organization by placing a checkmark in My Organization Only field. This report is under the REPORTS menu option. It displays assessments completed and their outcomes. It can be filtered by All Assessment Reasons, Initial Assessments Only, Re-Assessments Only, and Discharge/Transfer Assessments Only. This report can be filtered with or without date ranges.
 - o The report displays by option outcome and level of care.
 - Note: Due to the length of this report, exporting this report to .pdf creates a large file size.
 - o A sample of one of the report pages is shown below:



Statewide Aggregate Assessment Results

- **Assessment Results by Clinician:** This report under REPORTS Menu breaks down the results within the organization by individual clinician.
- It displays assessments completed and their outcomes. It can be filtered by All Assessment Reasons, Initial Assessments Only, Re-Assessments Only, and Discharge/Transfer Assessments Only. This report can be filtered with or without date ranges. The report displays by option outcome and level of care. A sample of one of the report pages is shown below:



Assessment Results by Clinician

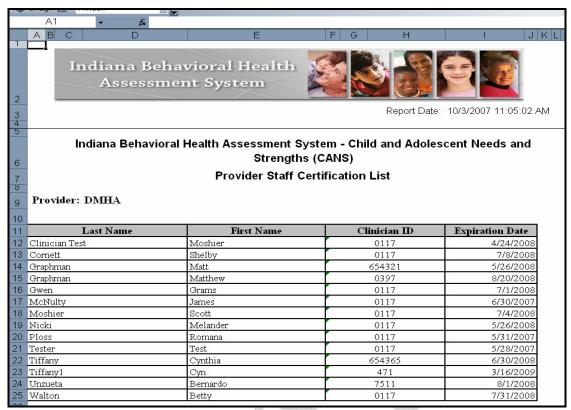
Staff Certification

From the "Reports" menu, select the "Staff Certification" option to display a page to select options for this report. The report displays several options. See the figure below:



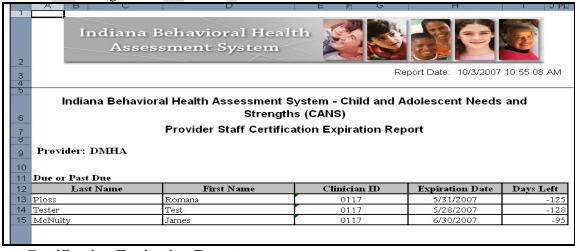
Certification Reports

- **Current Certified Staff:** This option allows the user to view all staff for the provider who are currently certified with the CANS assessment tools.
 - O Clicking this option also displays text-boxes to enter a date range. This limits the report to view staff certified within the date range selected.
 - o Leaving the date range empty displays all currently certified staff
 - o The report displays the users' name, Clinician ID and certification expiration date.
 - o See the figure below:



Current Certified Report

- Staff near/with Expired Certification: Selecting this option displays a list of staff in sections.
 - The first section displays staff whose certification is less than 30 days away or already past. The number of days until expiration (positive number) and days past expiration (negative number) is included.
 - The following sections displays staff with expiration dates at 30-60 and 60-90 days of today's date.
 - See the figure below:

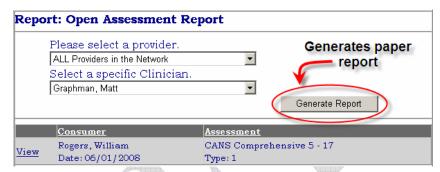


Certification Expiration Report

As with all new systems, new reports will be developed periodically as the need arises. State personnel want to analyze the initial assessment data to determine new, different or enhanced reports to develop. As with any new development for DARMHA, functionality and new reports are placed on the QA website for testing before being implemented on the production site.

Open Assessment Report

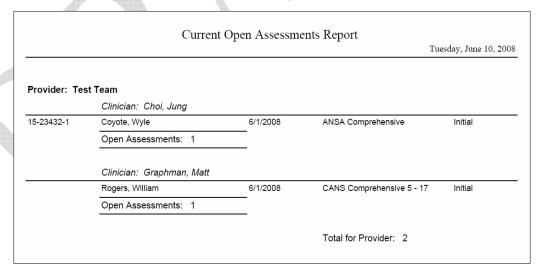
The Open Assessment Report provides for the user the ability to quickly view if a selected clinician has open assessments (or un-closed assessments) that need to be completed or deleted.



When the report is selected

from the Report Menu option "Open Assessments" option, the above page appears. A grid appears if there are any consumers with open assessments matching the selection criteria. The user can then quickly jump to the consumer's demographic page by selecting the "View" option for the corresponding consumer in the grid. The user may also generate a paper report by clicking on the "Generate Report" button.

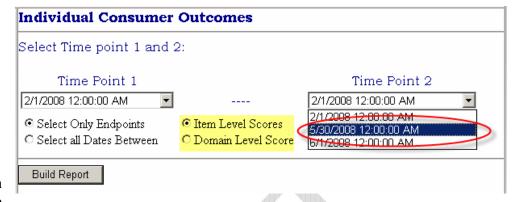
If you are not at the network layer, the first dropdown box in the illustration above will not be visible.



Example of Open Assessment Report

Individual Consumer Outcomes Reports

The Individual Consumer Outcomes Reports are only accessible once you have selected a consumer with one or more assessments.

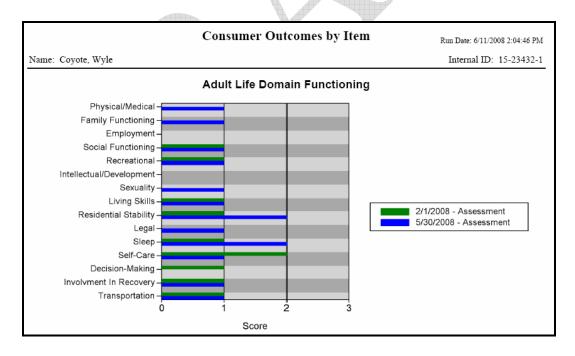


The menu option appears under the

"Reports" menu heading "Individual Outcomes". The screen populates with to time point selection drop-down lists, and two report settings buttons.

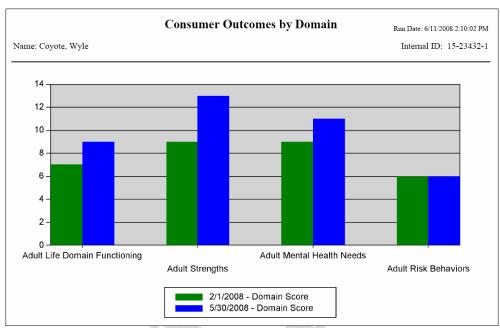
Select the two time points to reference in the outcome report. Under the "Time Point 1" drop-down list, the user may select to include only the two endpoints specified by the user, or they may choose to include all time points in between.

The "Item Level Scores" report as displayed below shows the multiple time points at the item level grouped by the respective domains.



Example Individual Consumer Outcomes by Item

The alternate option in this report page is to use a compiled domain score across the selected time points. This report – shown below – generates a domain score at each time point and presents it as a bar graph.



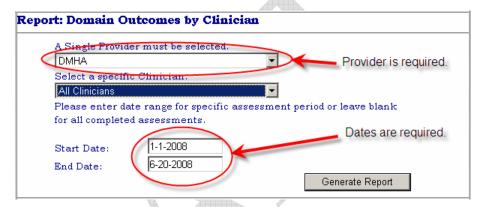
Example Individual Consumer Outcomes by Domain

Domain Outcomes by Clinician Report

The Domain Outcomes by Clinician Report can be run at the Provider Level for either a specific clinician or all clinician's within the organization. The resulting report illustrates the domain scores at multiple time points for consumers assessed by the clinicians. This report can be rather large, so it is suggested that it be run against specific clinicians whenever possible.

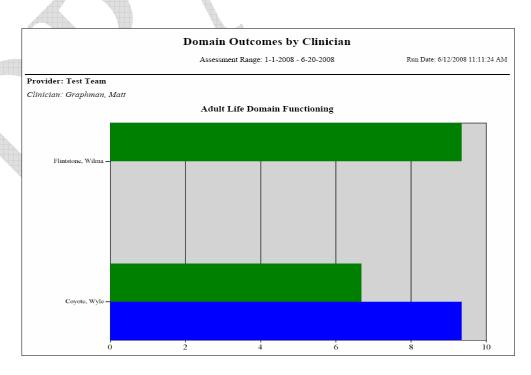
The resulting bar graph as shown below groups the consumers item scores into a single domain score and matches them against other consumers assessed by the same clinician. Each of the primarily life domains are represented by the reports. Each time point represented by an assessment for a consumer is shown as a separate bar on the graph.

The report supports the new network level reporting, it still requires that a single provider be selected – this is due to the size of the output. Also, a start and end date for the assessment period must also be selected before the report can



be generated. If you are not at the network layer, the first dropdown box in the illustration above will not be visible.

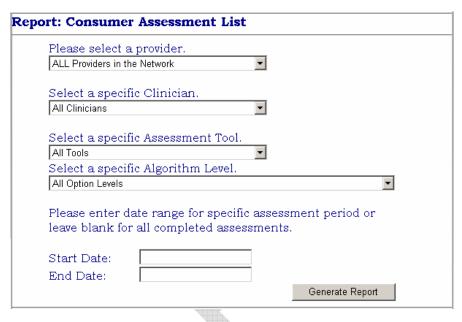
Example of Consumer Outcomes by Domain



Consumer Assessment List Report

The Consumer
Assessment List Report is available from the Report
Menu under the option
"Consumers Assessed".
This report allows the user to generate a listing of consumers assessed and groups the output in the following order:
Provider, Clinician, Tool, and Algorithm Result.

Resulting data in the report only includes consumers that have a completed assessment.



Open assessments are not reported. To target a specific population, you can select the algorithm level to concentrate the reports focus.

	Consumers Assessed by Option	Run Date: 6/12/2008 11:38:07 AM			
Provider: Test Team	1				
Clinician: Graphmar	n. Matt				
Tool: CANS Comprehensive Birth to 5					
Algorithm: DCS - Pla	acement - Birth to 5				
0 - No Recommend					
Internal ID	Consumer Name	Date of Assessment			
2222222222	Walton, Baxter Count: 1	6/5/2008			
Tool: CANS Compre	ehensive 5 - 17				
Algorithm: Mental H	ealth				
3 - Intensive Case N	Management, Day Treatment, Intensiv				
Internal ID	Consumer Name	Date of Assessment			
666666666	Fudd, Elmer Count: 1	6/5/2008			
Algorithm: DCS - Placement					
0 - No Recommendation					
Internal ID	Consumer Name	Date of Assessment			
666666666	Fudd, Elmer Count: 1	6/5/2008			

Consumers Reassessment Report

The Consumer Reassessment Report can be found under the Report Menu heading and the option "Reassessment Report". This report provides a listing of consumers who have been assessed one or more times, and are due for additional reassessment based upon a 180 day reassessment target.

The options of the report allow the user to select a range for the consumers that fall on that anniversary date.

Please select a	provider. Select target for
Test Team	reassessment.
Select a specifi	e Chinician
Graphman, Matt	default is 180 days
Set Target:	Select The Reassessment Target Time from the Selection Below:
(© 180 Days ○ 90 Days ○ 60 Days
Select by	Please select one of the timeframes for
Range:	reassessment.
	○2 Weeks ○30 Days ○6 Weeks ○60 Days
C Select by Date	Please enter date range for specific assessment
Due:	period.
	Start Date:
	End Date:
	Generate Repo

There are four predefined date ranges that can be picked by making sure the "Select by Range" button is selected and then picking either 2 Weeks, 30 Days, 6 Weeks, or 60 Days. All of those options are in relation to today or the date that the report is being executed. The system then looks at all consumers who's last assessment would be 180 days prior of that window of time selected.

The reassessment target that this report is run against, may be selected from the first set of buttons. The default option for reassessment is 180 days. The user may choose to set the target to either 90 or 60 days. This alters the calculation for the generation of this report to check all consumers for reassessment based up the indicated target.

The user may also set a custom date range to better target and plan for reassessments. This is done by making sure the "Select by Date Due" option button is marked, and then the Start Date and End Date of that range should be entered. The user can choose as little as a day or as long as they wish.

This report is broken down by Provider, Clinician and then Consumer. If you are not at the network layer, the first dropdown box in the illustration above will not be visible.

		Reassessment Report	
Reaseessments the next 6 Weeks		For Dates: 6/12/2008 - 7/24/2008	Thursday, June 12, 2008
Provider: Test T			
Internal ID:	Consumer Name:	Next Assessment Date:	
15-4748-99	Flintstone, Wilma	6/29/2008	

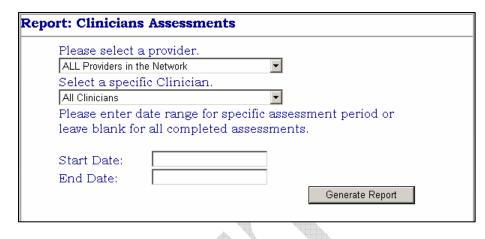
Example of Consumer Reassessment Report

The report displays the Consumer's Name, their internal identifier and the date that the system indicates is their 180 anniversary from their last assessment.



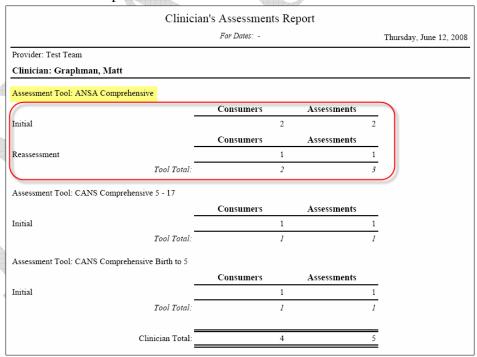
Clinician's Assessments Report

This report generates for the user a breakdown of a clinician's assessment caseload. The report is selectable by Provider and by Clinician. If you are not at the network layer, the first dropdown box in the illustration above will not be visible.



The user may select a specific period of time to limit the scope of the report by entering in either a start or/and end date.

The report returns for the user an aggregate count of consumers assessed by the clinicians, and they are grouped by the assessment tools used and reasoning for assessment such as "Initial" or "Reassessment" as indicated in the example below.



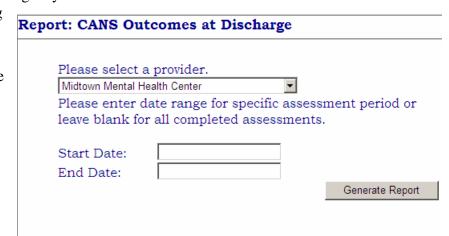
Example of Clinician's Assessments Report

CANS Outcomes at Discharge Report

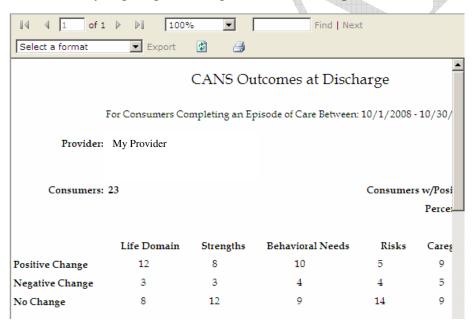
This is report captures an agency's outcomes information for consumer's that have received a

CANS discharge during a selected period of time.

Enter a date range at the prompt for the consumers' who have received a discharge assessment. The system then calculates the aggregated outcomes based upon the users that have received a discharge

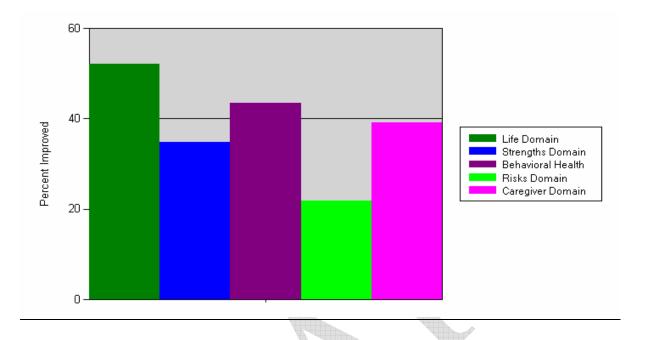


assessment during the time period specified. The outcomes are based upon the "Reliable Change Index" value for each of the 5 domains. A positive change is determined if the domain score for each individual is greater than the change index for that domain. A negative change is determined by negating the change index for the respective domain.



This report is exportable to PDF and Excel like all other reports in DARMHA, and is also printable directly from the print view window. Just click on the printer icon in the center of the toolbar to send the report directly to the printer.

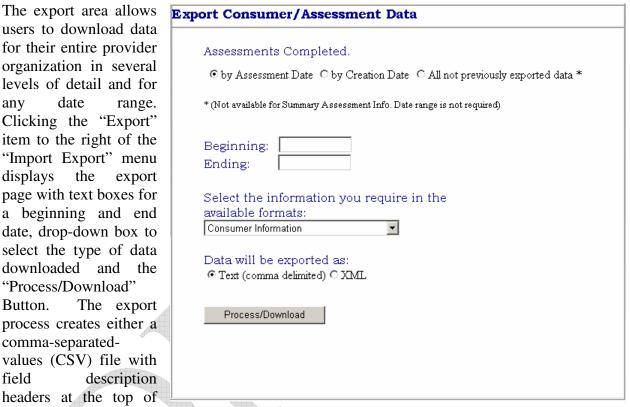
The CANS Outcomes at Discharge report also includes a graph that depicts the percentages of the positive change in the different domains of the consumers included in the report.



Export Process

If you have access to this area, the menu item titled "Import Export" displays in the menu on the left side of the page. Placing the mouse over this menu item displays four options: "Export", This section describes the "Export" area. "Import", "Import Log" and "Export Log". Information contained in this document is more general. Detailed technical documentation is available at the following location: http://ibhas.in.gov/mainDocuments.aspx. The file name is Import/Export Specifications.

The export area allows users to download data for their entire provider organization in several levels of detail and for date any range. Clicking the "Export" item to the right of the "Import Export" menu displays the export page with text boxes for a beginning and end date, drop-down box to select the type of data downloaded and the "Process/Download" Button. The export process creates either a comma-separatedvalues (CSV) file with field description

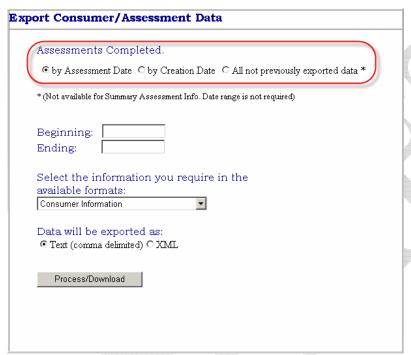


each file or a newly created XML document. The export file, once created, appears on a download page. This file is stored for the user to re-download at a later time by selecting the "Export Log" option from the menu. Also on the download page is a copy of the XML schema documents needed to map XML exports to the appropriate fields when performing an import.

The beginning and end dates are self-explanatory and the page does not accept invalid dates (an invalid date triggers an error message and doesn't allow the process to run). The drop-down box allows the user to select the type of information to download. Options:

- Consumer Information Provides all demographic data for all consumers with a completed assessment
- Summary Assessment Info Provides the Consumer's ID, Decision Support Threshold process that was run, Decision Support Recommendation, Assessment Date, Clinician ID, Reason for Assessment, Assessment Tool Description and System Generated Assessment Tool ID

- Detailed Assessment Info Provides the Consumer's ID, Assessment Date, System Generated Assessment Tool ID, Assessment Tool Description, Domain (or Module) Name, System Generated Question ID, Question Text, System Generated Answer ID and Answer Text
- Consumer Info and Detailed Assessment Provides a combination of the Consumer Information and Detailed Assessment Info downloads
- Assessment Tool Provides the system generated data related to all the assessment tools, domains, questions and answers. To access this information, begin and end dates are not needed.



Export Process

The user has a choice to select how the export will utilizes dates supplied or they may choose to select "All data not previously exported".

Data pulled for the Consumer Information, Detailed Assessment Info, or Consumer Info and Detailed Assessment options updates the last exported flag on the selected records. The Summary Assessment Info export does NOT update the exported flag.

Use the beginning and end dates

to select data supplied to the system either by the date that it was posted to the application (Creation Date) or by the date of Assessment. The page does not accept invalid dates (an invalid date triggers an error message and doesn't allow the process to run). The drop-down box allows the user to select the type of information to download.

Download Options are as follows:

- Consumer Information Provides all demographic data for all consumers with a completed assessment
- Summary Assessment Info Provides the Consumer's ID, Decision Support Threshold process that was run, Decision Support Recommendation, Assessment Date, Clinician ID, Reason for Assessment, Assessment Tool Description and System Generated Assessment Tool ID
- Detailed Assessment Info Provides the Consumer's ID, Assessment Date, System Generated Assessment Tool ID, Assessment Tool Description, Domain (or Module) Name, System Generated Question ID, Question Text, System Generated Answer ID and Answer Text

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- o Consumer Info and Detailed Assessment Provides a combination of the Consumer Information and Detailed Assessment Info downloads
- Assessment Tool Provides the system generated data related to all the assessment tools, domains, questions and answers. To access this information, begin and end dates are not needed.

Export Download:

Once you have selected the appropriate export options and selected the Process / Download button, you are be taken to the Export File Download Page. This page is also accessible from the "Export Log" menu option.

Click with your Right mouse button on the "Download" link and select "Save Target As" from the pop-up menu.



This begins the download process of your data extract. If you are using the XML format, be sure to also download the appropriate Schema documents from this page as well.



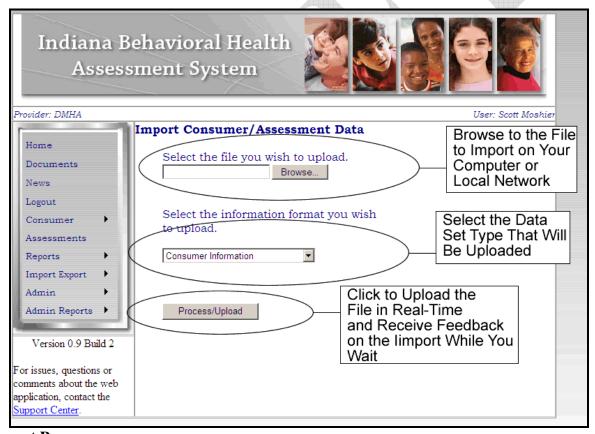
Import Process

Clicking on the "Import" when users mouse-over the "Import Export" menu item displays the import page. It is very simple with a button to browse to a file on the user's computer or network and a drop-down box to identify the type of information being imported (consumer or assessment information).

Click the "Process/Upload" Button to start the import process. This is done in real-time while the user is logged into the website. Detailed technical documentation is maintained in this location http://ibhas.in.gov/mainDocuments.aspx.

The file name is Import/Export Specifications.

In short, the file is moved to the state, checked for a number of errors and then loaded to the database if there are no errors. If there are errors the import log displays basic information about those errors. Given that much of the information related to importing data is technical, please refer to the technical documentation mentioned above for the details.



Import Process

Import Log

Clicking on the "Import Log" when users mouse-over the "Import Export" menu item displays the import log page. It displays summary information related to each import performed for the user's provider organization.

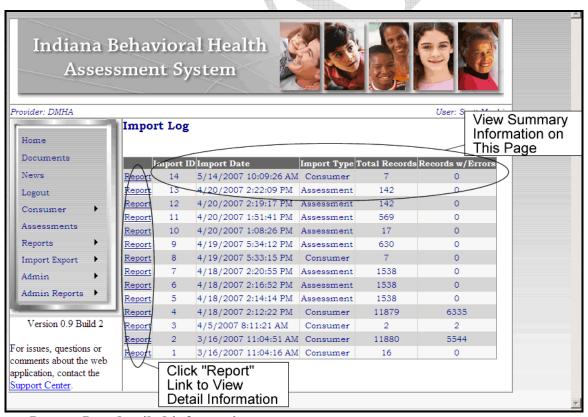
The summary information includes:

- the system generated "import id",
- import date and time,
- type of information imported,
- number of records (rows) included in the file and number of records with errors associated with them.

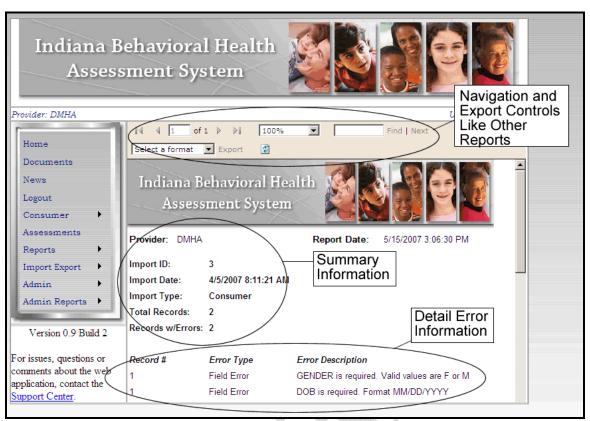
The "Report" link beside each row in the grid displays the full import report including all errors identified by record number, error type and a short description of the error. Examples of error descriptions are:

- "DOB is required. Format MM/DD/YYYY",
- "FIRST NAME is required. Max length = 25",
- "ETHNICITY valid values are 1,2,3,4,5 and 6",
- "Assessment Clinician Error: Record(s) with invalid Clinician ID or expired certification were found".
- Assessment is incomplete: Affect Regulation answer is missing from a mandated extension module Trauma Module.

The import reports are generated like any other report on the website can be exported to Excel for convenient sorting or manipulation. See figure below:



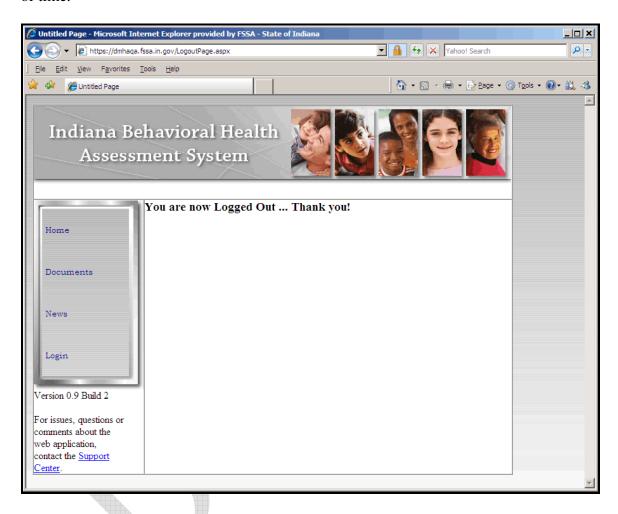
Import Log detailed information page



Import Log Summary

Log Out

When you are finished working in DARMHA, use the "Log Out" menu item. This maintains appropriate security for the data. If the log out function is not used, however, you will be automatically logged out if not perform any tasks in DARMHA for a period of time.



Log Out

Direct any questions regarding the DARMHA system to:

darmha@fssa.in.gov

DARMHA Support 402 West Washington Street, W353 Indianapolis, IN 46204 FAX 317.234.6722